



Performance Report

Performance Period January 2005 – March 2005

Introduction

This section contains information relative to monitoring by the Department of Education of system infrastructure and performance necessary to meet the needs of students requiring educational and mental health supports. The Department continues to improve the sophistication and availability of tools to assist in administrative decision-making that directs the application of resources, fiscal and human, to achieve high levels of student achievement. This process relies on data collected through multiple means to provide current information on system infrastructure and performance.

This report covers the Third Quarter, January 2005 through March 2005, of School Year 2004-2005. It is the tenth quarter under the Felix Consent Decree “Sustainability Period.”

Infrastructure

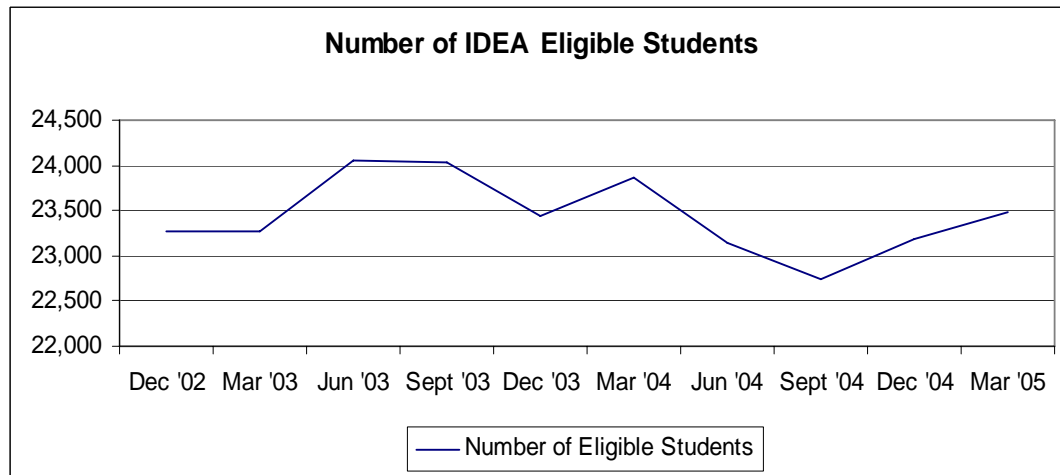
The Comprehensive Student Support System (CSSS) continues to provide the requisite infrastructure for the provision of programs necessary to provide educational, social, and emotional supports and services to all students, affording them an opportunity to benefit from instructional programs designed to achieve program goals and standards. EDN150 allocations contain those resources (fiscal, human, material, procedural, and technological) important to the provision of appropriate supports and services to students within the Felix Class. The objective of EDN150 programs are to maintain a system of student supports so that any student requiring individualized support, temporary or longer term, has timely access to those supports and services requisite to meaningful achievement of academic goals.

The next segments of this section contain elements of the CSSS infrastructure determined to be essential to the functioning of a support system constituting an adequate system of care. During the course of the Felix Consent Decree, the Department routinely provided progress reports addressing the availability of qualified staff, funding, and an information management system (ISPED) as a means to provide information germane to assessing system capacity in providing a comprehensive student support system.

Population Characteristics

There are 26,143 students eligible for educational supports and services under the Individuals with Disabilities Education Act (IDEA), and Section 504 of the Rehabilitation Act of 1973 (Section 504), at 90% and 10%, respectively. The number of students receiving educational supports and services within CSSS levels 4 and 5 by the Department of Education has declined slightly over the past two years. In March 2005, 14.4% of the overall student enrollment received specialized instruction and supports,

while 12.9% were eligible for special education and related services under the Individuals with Disabilities Education Act. The number of students receiving such services has fluctuated from slightly fewer than 15% of the student enrollment in December 2002, to nearly 14% of the student enrollment in December 2004. Nationally, in 2000 (the most recent information available), approximately 12.5% of the total student enrollment required special education supports and services.



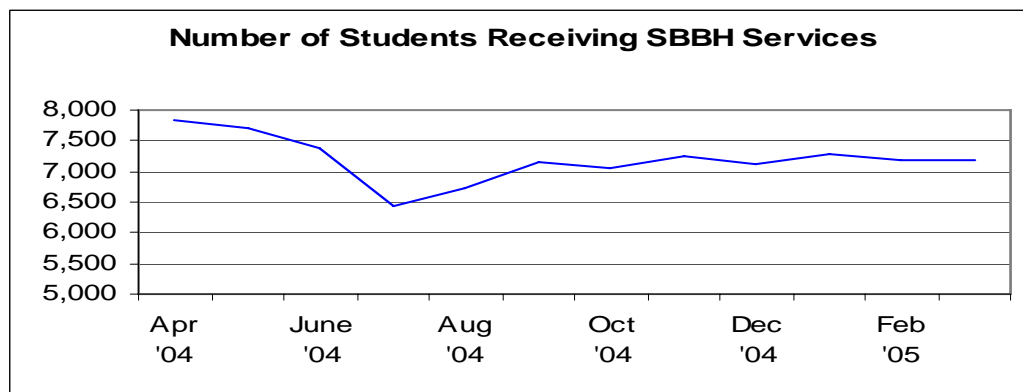
The table below depicts the number of students with disabilities and relative percentage over the past two years during the months of March.

Change in Number and Relative Percentage of Students Eligible for Special Education; 3/2003 to 3/2005

Disability	3/31/2003		3/31/2004		3/31/2005	
	#	%	#	%	#	%
Mental Retardation	2,155	9.3	2,116	8.8	1,842	7.9%
Hearing Impairment	436	1.9	321	1.3	405	1.7%
Speech/language Impairment	1,699	7.3	1,408	5.9	1,194	5.1%
Other Health Impairment	1,884	8.1	2,367	9.9	2,602	11.1%
Specific Learning Disability	11,372	48.9	10,422	43.7	10,162	43.4%
Deaf-Blindness	3	0	6	0.02	5	0.02%
Multiple Disabilities	382	1.6	389	1.6	418	1.8%
Autism	646	2.8	825	3.4	940	4.0%
Traumatic Brain Injury	80	0.3	79	0.3	79	0.3%
Developmental Delay	1,412	6.1	2,757	11.6	2,873	12.3%
Visual Impairment	82	0.4	75	0.3	78	0.3%
Emotional Disturbance	3,011	12.9	2,920	12.2	2,711	11.6%
Orthopedic Impairment	115	0.5	115	0.48	106	0.5%
TOTAL	23,277		23,860		23,438	

Decreases in the incidence of Specific Learning Disabilities and Emotional Disturbance may indeed be attributable to improved instruction and behavioral/mental health supports and services. While data do not permit a causal relationship to be verified, there has also been a simultaneous increase in overall student achievement, particularly at the elementary school level and sustained access to effective instructional supports and services. The increases in the Autism Spectrum Disorder and Developmental Delays, offset by a decrease in Mental Retardation, are consistent with national data and reflect improved identification and evaluation methods.

An average of 7,215 students per month, 27.6% of all CSSS Levels 4 and 5 students, received School-Based Behavioral Health (SBBH) student supports during this quarter. The graph below displays the month by month average over the past year. Approximately 4% of all students enrolled in the Department required SBBH services to address educational and social, emotional, or behavioral needs in the educational arena. On average during this quarter, 26,143 additional students per month received some type of SBBH supports. More detailed information regarding SBBH services is available under Performance Goals 13-15 in the following pages.



Services provided to Felix Class students fall in two broad categories: School Based Behavioral Health (SBBH) Services and services to students with Autism Spectrum Disorder (ASD). While the determination of need for and type of SBBH or ASD service necessary for any individual student to benefit from their educational plan is made by a team during the development of the plan, guidelines regarding the provision of these services are in the joint DOE and DOH Interagency Performance Standards and Practice Guidelines.

(134) The system must continue to hire and retain qualified teachers and other therapeutic personnel necessary to educate and serve children consistently

(Revised Felix consent Decree, July 1, 2000, page 20)

Qualified Staff

Qualified staff providing instructional and related services are the lynchpin of appropriate educational and related services for students with disabilities, for they are the ones with

expertise and training in curriculum, instruction, and knowledge of the impact of the student's disability on the learning process. These qualified individuals, in conjunction with parents and others, develop and implement appropriate interventions designed to meet the unique needs of students.

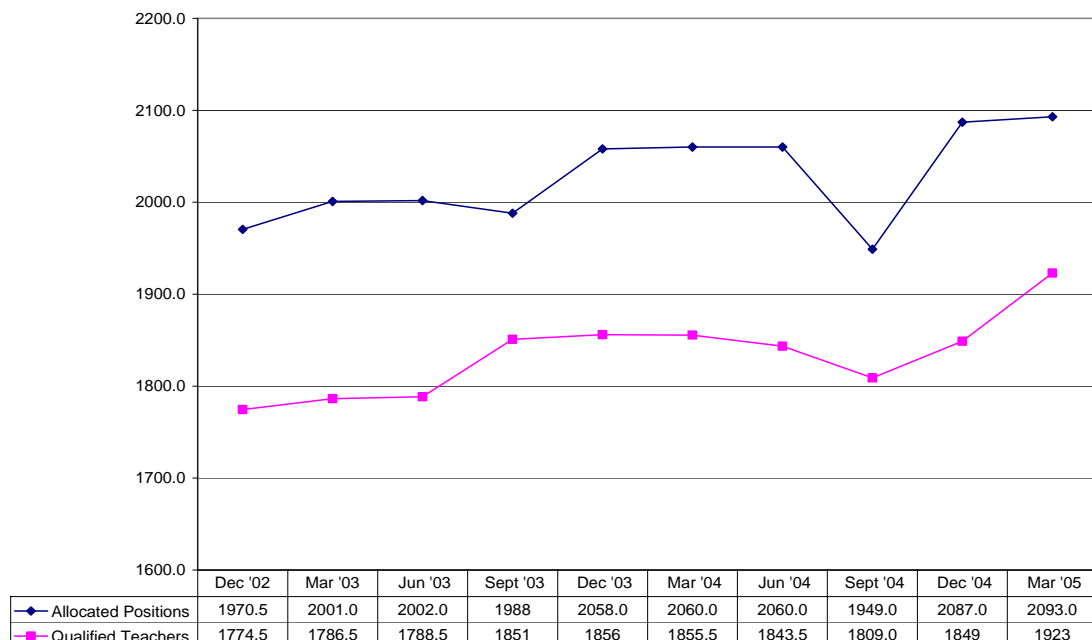
The following staffing goals provide evidence that there are sufficient qualified teachers evenly distributed across the state to ensure timely access to specialized instruction for students and professional support to those providing educational and related services and supports to students with disabilities.

Infrastructure Goal #1: Qualified teachers will fill 90% of the special education teacher positions in classrooms.

The percent of qualified special education teachers provides an important measure of the overall availability of special education instructional knowledge available to support student achievement. At the end of this report period, there were 2,031 special education teachers in classrooms, an increase of 17 positions. Nearly 92% of the teachers in special education classrooms are qualified in special education, meeting this infrastructure goal. This is an increase in the percentage from last quarter.

The increase was due to the hiring of additional teachers and some teachers fulfilling training requirements. The Department employs 71 teachers through a contract with Columbus, an increase of 18 over last year.

Number of Allocated and Qualified Special Education Teachers

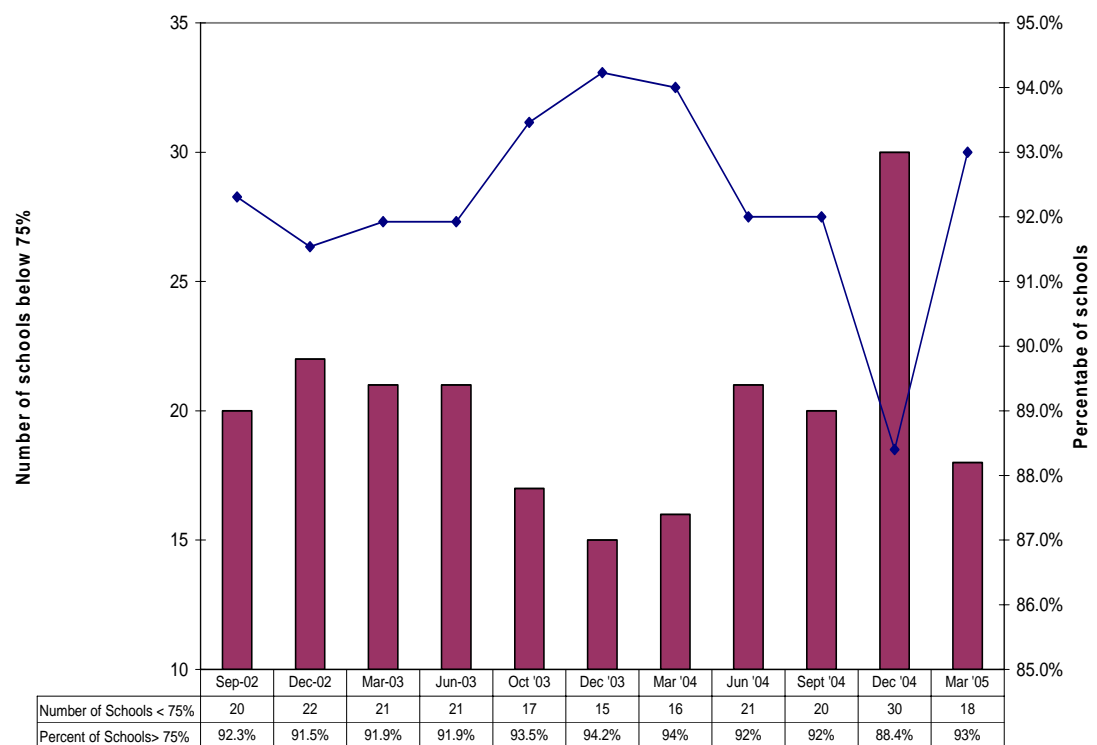


Over the past 27 months there has been a steady increase in both the number of special education teachers and the number of qualified special education teachers.

Infrastructure Goal #2: 95% of the schools will have 75% or greater qualified teachers in special education classrooms.

This measure provides information regarding the availability of special education knowledge and expertise to assist with day-to-day instructional and program decision making in support of special needs students. A previous benchmark set forth the target of hiring so that there is no school with less than 75% qualified teachers in the classroom. In order to meet this goal, schools requiring less than four (4) special education teacher positions, 28% (72) of the schools, would be required to have all (100%) of the placed special education teachers qualified. The Department has determined a practical goal is that 95% of all schools will have 75% or greater qualified special education classroom teachers.

Qualified Special Education Staff at Schools

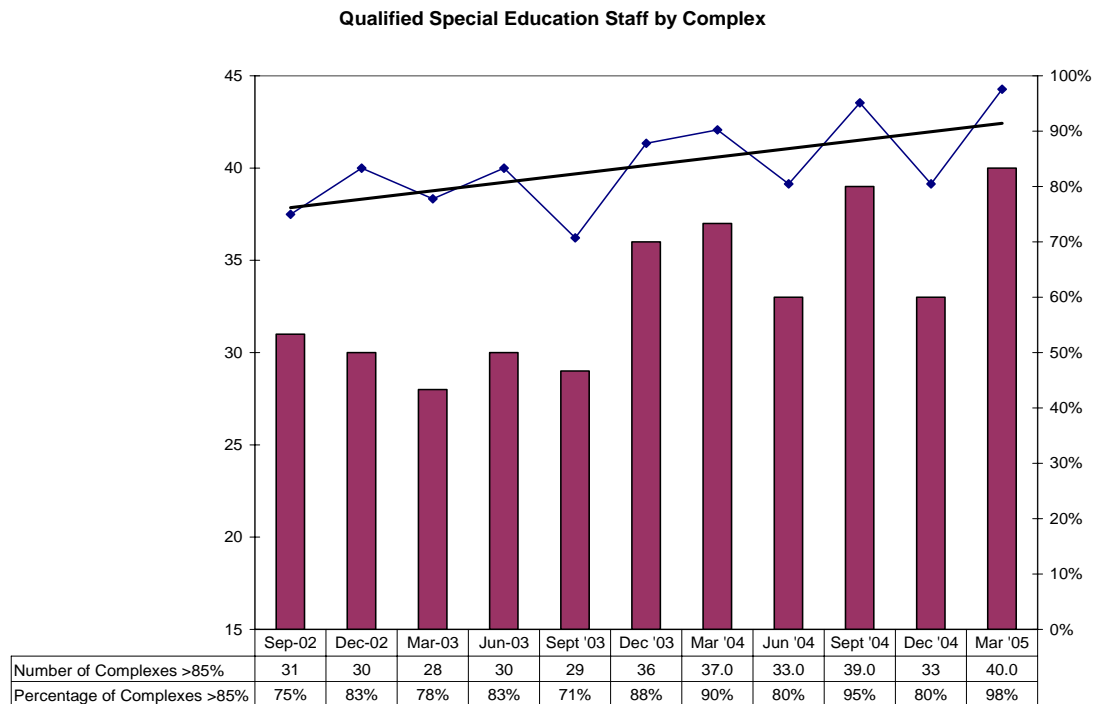


At 93%, the Department falls just short of its set goal. This is due to the overall national shortage of special educators and the use of .5 F.T.E. positions in special education classrooms. As noted earlier, the Department continues to contract outside resources to recruit and retain special education teachers. Meeting this goal is complicated due to the number of schools with few, two or less, full-time positions and half-time (0.5 FTE) positions.

Infrastructure Goal #3: 85% of the complexes will have greater than 85% or greater qualified teachers in special education classrooms.

This measure helps illustrate the distribution of special education instructional expertise throughout the state. The prevalence of qualified staff throughout a complex is an indicator of the degree of support available to school staff and the continuity of instructional quality over time for students. For example, the impact of less than 75% qualified staff in a school within a complex with all other schools fully staffed is far less than if all schools in the complex had less than 75% qualified staff. Therefore, the Department has added this measure as an internal infrastructure indicator for monitoring.

The graph below depicts the distribution through the 42 complexes of qualified special education teachers. As can be seen by the straight black trend line, there has been a steady increase over the past two years in the number of complexes with greater than 75% of the special education teaching positions filled with qualified teachers.



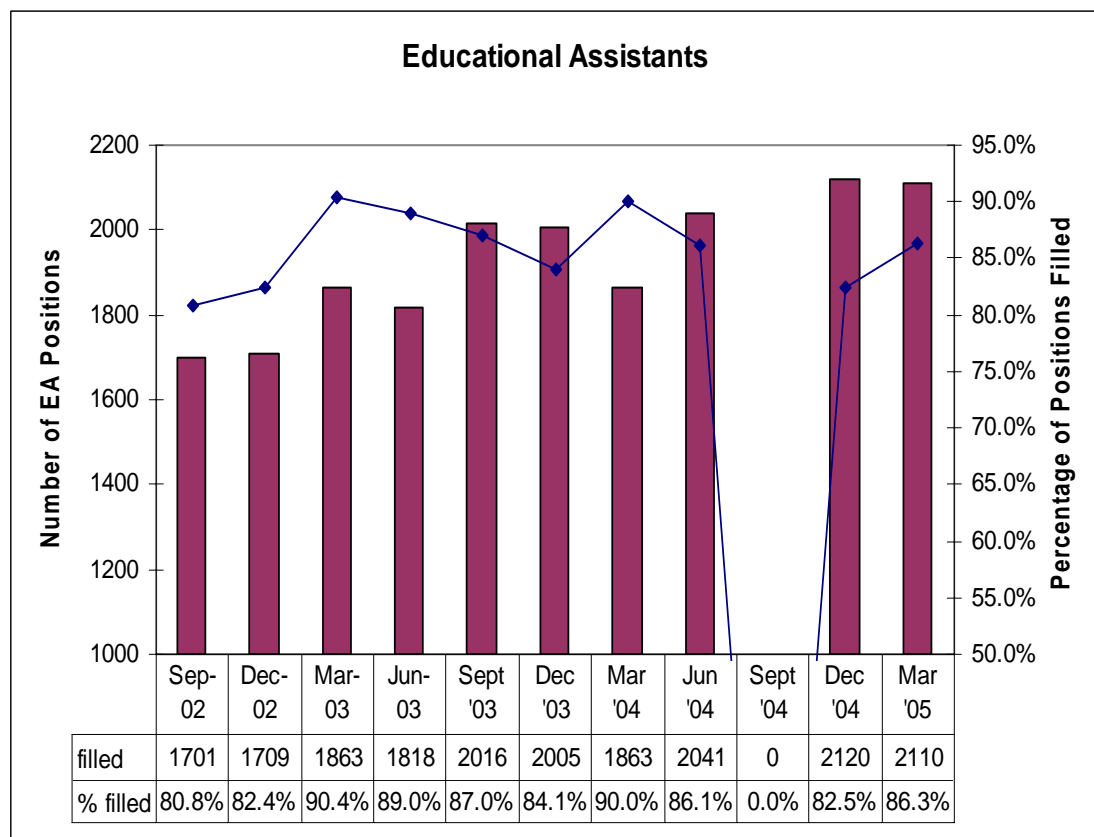
This Department established infrastructure goal is met with 96% of the complexes having greater than 85% qualified teachers in special education classes.

Infrastructure Goal #4: 95% of all Educational Assistant positions will be filled.

Educational Assistants (EAs) provide valuable support to special education students and teachers throughout the school day and in all instructional

settings. Since SY01-02 the EA allocation ratio is 1:1 with the Special Education Teacher allocation. Initially, the 100% increase in EA positions severely taxed the recruiting and employing capacity of the Department of Human Resources Development. Streamlining the process and transferring greater responsibilities to the Office of Human Resources within the DOE was only partially effective as the requirements of the No Child Left Behind Act (NCLB) took effect.

The Department's internal goal is to have 95% of all EA positions filled. This goal was not reached this quarter. As can be seen in the table below, over the last two (2) years the Department hired 411 more EAs, but it has not affected the percentage of filled positions because close to 500 more EA positions have been established.



*Data for September 2004 is not available due to conversion from DHRD to DOE database.

Infrastructure Goal #5: 75% of the School-Based Behavioral Health professional positions are filled.

Since December 2000, the Department has maintained that the use of an employee-based approach to provide School Based Behavioral Health (SBBH) services provides greater accessibility and responsiveness to emerging student needs. While it is anticipated that some degree of services will always be purchased through contracts due to uniqueness of student need and unanticipated workload increases, day-to-day procedures presume the availability of staff. Early planning anticipated

a two to three year phase to reach the point at which employees would do 80% of the SBBH workload. Performance Goal #13 addresses the relative percent of work done by DOE employees and contracted providers, indicating that during this quarter over 80% of all SBBH work was performed by Department staff.

Table#6: Number of SBBH Specialist Positions

	12/02	12/03	12/04	3/05
Number of Positions Filled	232	226.5	252	252
Percent of Total Positions	78%	77%	83%	83%

Infrastructure goal #5 is met, as there are now 252 SBBH Specialist positions and 21 clinical psychologist positions filled. The actual number of positions changes due to flexibility built into the SBBH funding structure that allows complex decisions regarding staffing. The decline in hired clinical psychologists is due to their inability to meet established requirements to be awarded licensure as a clinical psychologist.

The Department is working with the Department of Commerce and Consumer Affairs to increase the frequency of licensure board meetings. In the meantime, the Department contracts for the services that only clinical psychologists can provide.

Infrastructure Goal #6: 80% of the identified program specialist positions are filled.

This Infrastructure Goal is directly attributable to a previously established Felix Consent Decree benchmark based upon a determination by the Court Monitor that in 2000 the Department did not have sufficient program expertise in several areas. Recruiting and retaining leadership for these key program areas has been an ongoing challenge for the Department. The lack of in state programs providing terminal degrees, coupled with geographic isolation from institutes of higher education and recruitment constraints regarding pay based on experience earned in other systems, has made it very difficult for the Department to hire program specialists.

Increased levels of knowledge and skills possessed by Department staff and contractors has changed the type of expertise necessary to continue to foster system growth and improved performance. The system now requires experienced administrators, supervisors, and trainers of discrete intervention skills.

At the present time four (4) of the identified program specialist positions continue to be filled with the same program specialist as last quarter. This is consistent with agreements made with Plaintiff Attorneys regarding the aforementioned changing needs of the Department. Based on these numbers, this infrastructure measure is met.

The Department continues to seek a program specialist in the area of Autism Spectrum Disorder with recognizable program and administrative skills necessary to provide clear guidance to school communities and professionals. The individual recruited during the last quarter for this position has declined the most recent offer. A series of technical assistance contracts have been and will continue to be in place to assist service providers. As can be seen in the associated Autism Spectrum Disorder Performance Indicator, #12, services continue to be available and appropriate for these students.

Integrated Information Management System - ISPED

The need for an information management system to provide relevant data for analysis and decision-making is an important component of the infrastructure necessary to sustain high levels of system performance in the area of supports and services to students in need of such services. This information provides the basis for resource allocation, program evaluation, and system improvement.

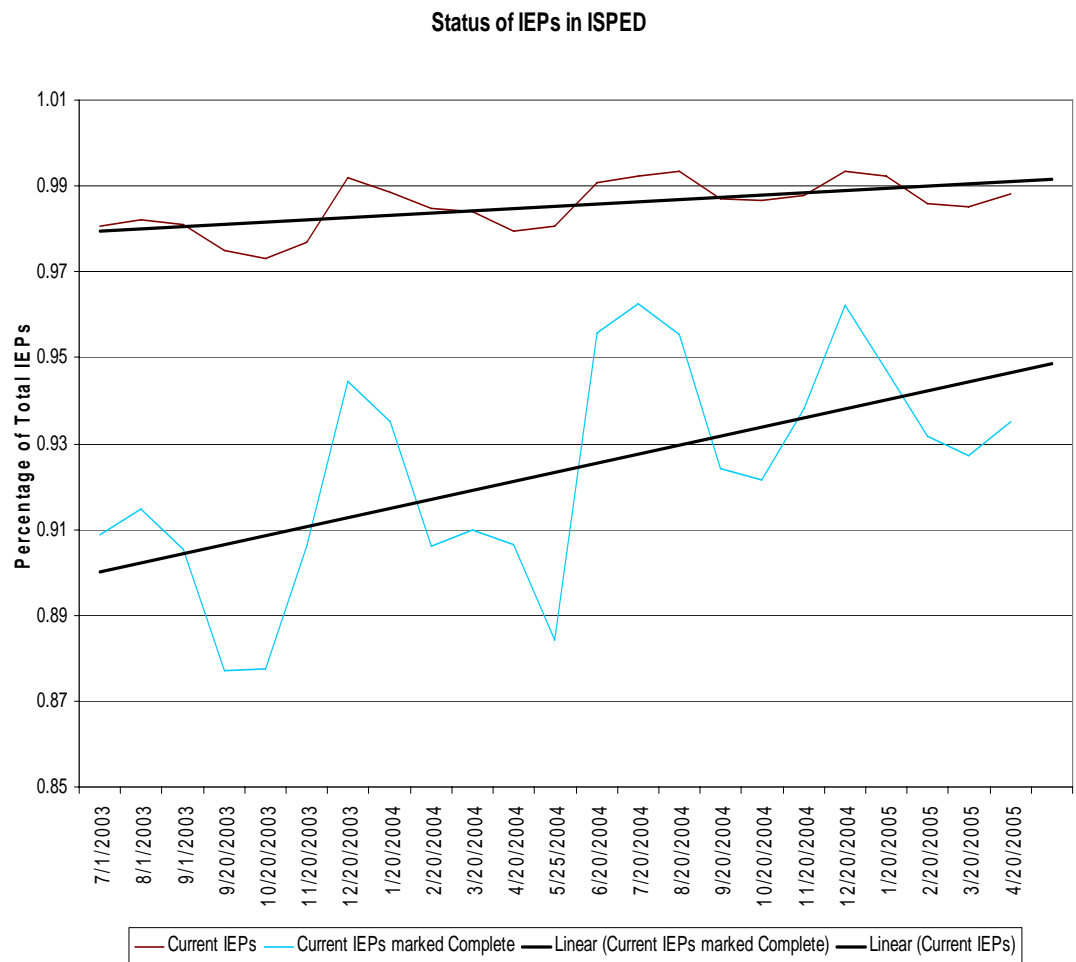
Meaningful measurement of ISPED will provide specific information regarding the following: 1) ISPED data accuracy, 2) ISPED role in important management decisions, and 3) ISPED use by DOE administrators, CASs and principals.

Infrastructure Goal #7:

- a) 99% of special education and section 504 students are in ISPED,*
- b) 95% of IEPs are current, and*
- c) 95% of the IEPs are marked complete.*

The utility of ISPED as an information management system lies in the ability to provide a wide variety of users information that improves their productivity. Whether the information is unique student specific information used in program development or aggregate information used for planning purposes, accuracy and completeness is necessary. Achievement and maintenance of the three components embedded in Infrastructure Goal #7, gives users confidence that accessed information will assist in good decision-making.

At this time 99% of all students eligible for special education and related services are registered in the ISPED system. Of those, 99% have current IEPs in ISPED and 96% have been marked “complete”. The difference between IEPs in the system and those marked “complete” is mainly attributable to teachers awaiting additional information.



There is consistent widespread use of and reliance on ISPED as the information management system for special education records and decision making. The use of this system is institutionalized and integral to the ongoing management of special education throughout the Department.

Infrastructure Goal #8: ISPED will provide reports to assist in management tasks.

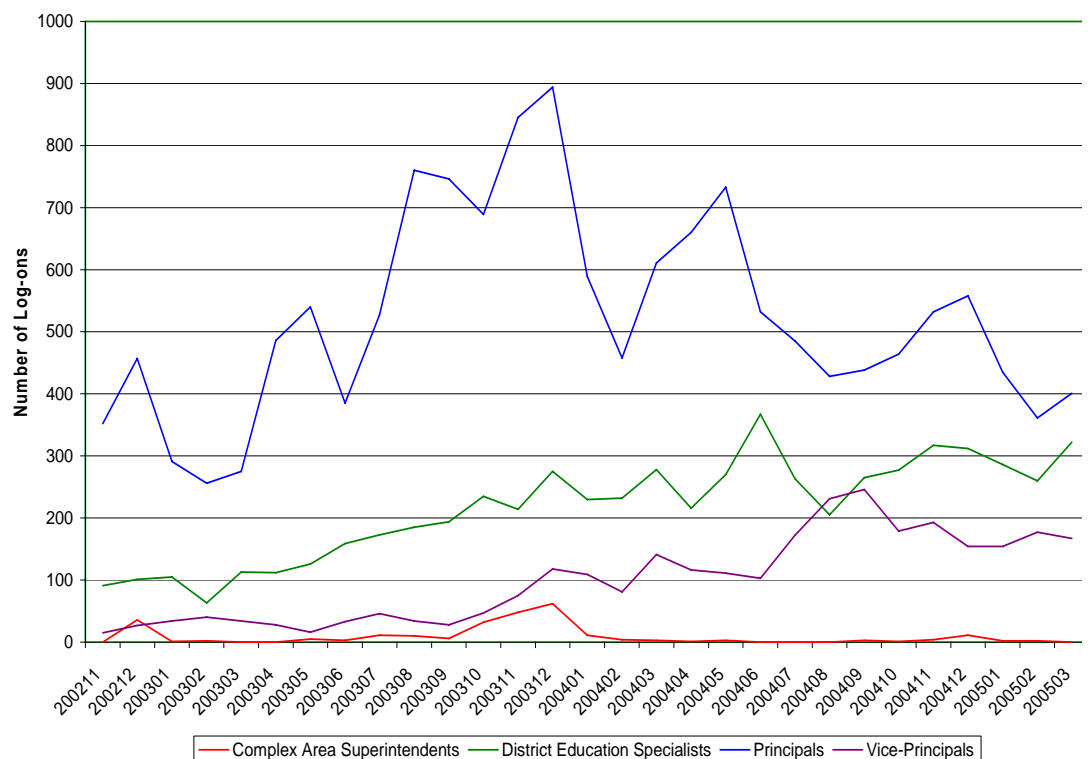
The increased administrative need for timely and accurate information is very evident in the ISPED reports. There are now over 90 different reports available to teachers and administrative staff. During this quarter many reports were reviewed to ensure that school specific information was easily obtained and understood by a wide variety of new users. Report formats have been revised to ease the transfer of information to the Web Site that posts school specific information.

Infrastructure Goal #9: School, district, and state level administrators will use ISPED.

As stated in the section above, ISPED provides DOE administrators over 90 real time reports designed to assist in measuring system performance at the school, complex, and state levels, as well as provide data for resource allocation. The Department began tracking administrator “log-ons” to ISPED as broad indicators of both the utility of the reports as well as administrative behavior regarding the use of data in proactive management.

As can be seen in the table below, over the past two years the use of ISPED by District Education Specialists (DES) and Vice-Principals has steadily increased. The Complex Area Superintendent (CAS) usage of ISPED is sporadic.

Administrative Use of ISPED



(135) The system must be able to continue to purchase the necessary services to provide for the treatment of children appropriate to the individual needs of the child

This data suggest that the action plans generated through the Special Education Section designed to improve overall system performance has had an impact on administrative behavior regarding the use of data in decision making and monitoring the impact of system performance activities. CASs report that upon receipt of monthly performance reports from the Special Education Section, a meeting with the appropriate DES is held to determine the appropriate school and system response to improve performance.

Infrastructure Goal #10: The Department will maintain a system of contracts to provide services not provided through employees.

During this report period the DOE has maintained the same 49 contracts with 26 different private agencies to provide SBBH services, including Community-Based Instruction Programs and ASD Programs and Services, on an as needed basis. These contracts were effective July 2003 and continue to June 30, 2005.

There are nine (9) types of contracts covering the following services: assessments, behavioral interventions, intensive services, psychiatric services, and five (5) for Community-Based Instruction (CBI) services. Listed below is the number of contracts by type of service.

Table #9: Types and numbers of contracted services

Type of Service	Number of Contracts
Assessment	10
Behavioral Intervention	11
Intensive Services	12
Psychiatric Services	8
CBI (ages 3-9)	1
CBI (ages 10-12)	2
CBI (ages 13-200)	3
CBI (gender specific)	1
CBI (ASD/SMR)	1

The average expenditure per month for contracted services for ASD students during SY 04-05 continues to be approximately \$2.9M per month. While not all the final March 2005 payments have been made and recorded, the expenditures for services to ASD students this quarter is approximately \$5M and the total for the year exceeds \$26M. This data excludes expenditures from Kauai.

Table #10: Number of students with ASD and Average Monthly Contracted Costs

	SY02-03	SY03-04	SY04-05
Average monthly expenditure	\$2.1M	\$2.6M	\$2.9M*
Number of students with ASD	835	1,012	1,125

*Based on 9 months

Purchased contracted SBBH services during SY 03-04 totaled \$5,463,510, averaging approximately \$481,522 per month. While total expenditures have not all been invoiced by contractors for the month of March 2005, a total of \$3.4 M has been expended for SBBH services this school year. This results in a rate of \$380,649 per month, significantly lower than the average last school year. As may be expected, and comparable to previous years, the increased use of these services during this quarter, results in the average monthly expenditure this quarter being higher than that during the previous quarter.

The SBBH expenditures discussed in the previous paragraph do not

include expenditures for off campus SBBH programs. Off campus programs, “Community-Based Programs”, continue to cost approximately \$661,000 per month.

Infrastructure Goal #11: Administrative measures will be implemented when expenditures exceed the anticipated quarterly expenditure by 10%.

The broad programmatic categories within EDN150 are Special Education Services, Student Support Services, Educational Assessment and Prescriptive Services, Staff Development, Administrative Services, and Felix Response Plan. EDN150 allocations for all of these groups total slightly more than \$284M dollars for SY 04-05. This represents the same amount of funding allocated in SY03-04.

As of the end of this quarter, March 2005, \$214.4M was expended. The costs in providing services to students with Autism Spectrum Disorder and SBBH CBI continue over budget. An emergency appropriation request has been approved by the Legislature.

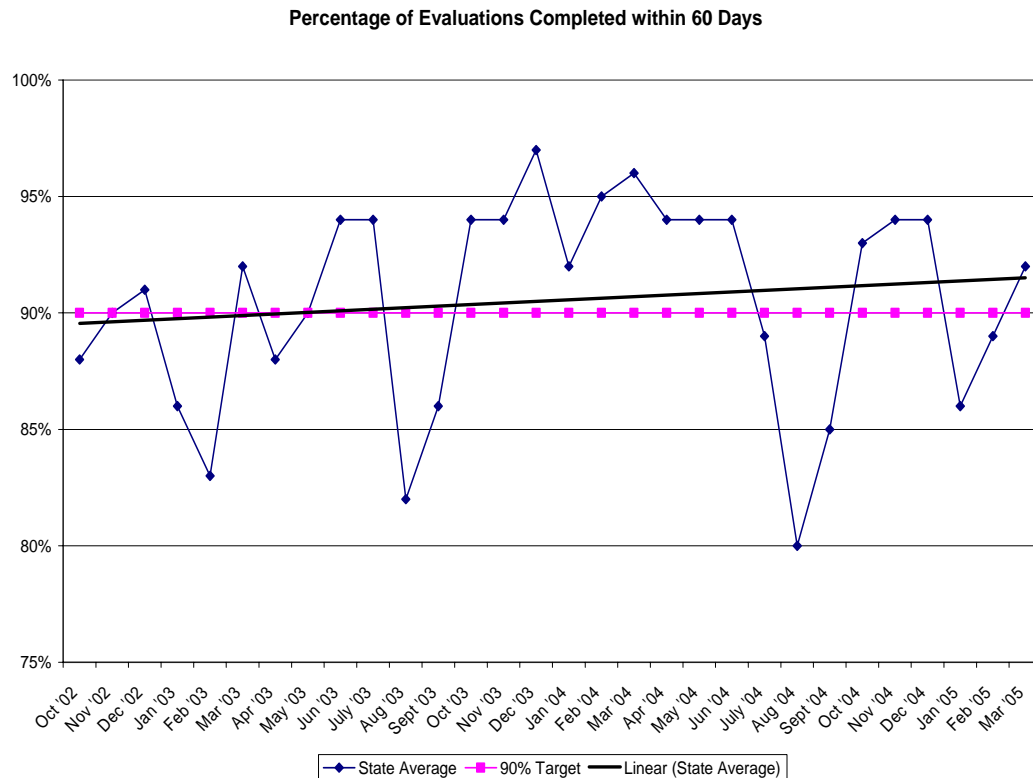
Key Performance Indicators

The existence of an adequate infrastructure is not an end in and of itself. The true measure of the attainment of EDN150 program goals and objectives are in the timely and effective delivery of services and supports necessary to improve student achievement. While the measurement of student achievement lies within the purview of classroom instruction, key system performance indicators exist that provide clear evidence of the timeliness, accessibility, and appropriateness of supports and services provided through EDN150 and the responsiveness of CSSS to challenges threatening system performance.

(136) The system must be able to monitor itself through a continuous quality management process. The process must detect performance problems at local schools, family guidance centers, and local service provider agencies. Management must demonstrate that it is able to synthesize the information regarding system performance and results achieved for students that are derived from the process and use the findings to make ongoing improvements and, when necessary, hold individuals accountable for poor performance.

(Revised Felix consent Decree, July 1, 2000, page 20)

Performance Goal #1: 90% of all eligibility evaluations will be completed within 60 days.



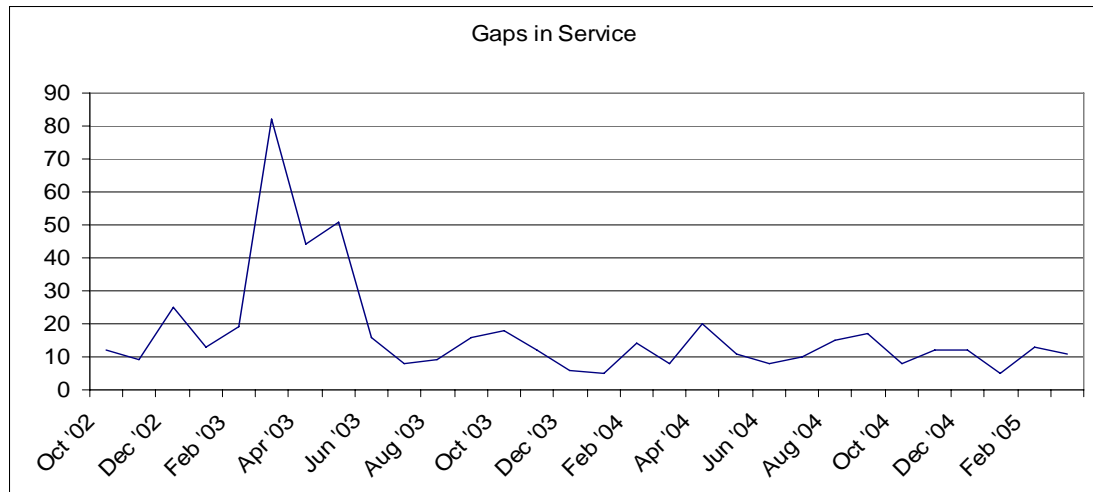
This performance goal has been met. Good practice and regulation expect timely evaluation to provide the foundation for an effective individualized education or modification program that will assist students achieve content and performance standards. This measure identifies the timeliness with which the system provides this information to program planners. As can be seen in the graph on the preceding page, the Department has made steady progress in meeting this performance goal since October 2002. Dips in performance occur when there is less access to students during long breaks in instruction, such as through the summer and winter breaks. During this quarter, 3,157 evaluations were conducted, slightly less than the 3,227 conducted the previous quarter.

State, complex, and school action plans are in place to maintain continued performance improvement in this area. Regular Superintendent and Complex Area Superintendent meetings focused on performance monitoring will continue to keep this a priority in school and complex operations.

Performance Goal #2: There will be no disruption exceeding 30 days in the delivery of educational and mental health services to students requiring such services.

A service delivery gap is a disruption in excess of 30 days of an SBBH or ASD related service identified in an IEP or MP. A “mismatch” in service delivery (i.e., counseling services expected to be provided by an SBBH

Specialist actually delivered by a school counselor) is included in this category as a service delivery gap. While this goal is technically not met, there is strong evidence shown below of substantial achievement in this area.



As can be seen in the graph above, there continues to be only a few students (slightly over ten (10) on average) for whom a program was not immediately available. The readers should keep in mind that there are in excess of 8,000 students per month receiving well over 22,000 identifiable “services” per month. Service delivery gaps occur for a variety of reasons but occur primarily because an individual related service provider (i.e., SBBH contractor) is temporarily unavailable to provide the requisite service as opposed to “wait lists” which are due to the unavailability of a program of educational services. The majority of gaps this quarter were due to the unavailability of specific counseling services at one school site. It was remedied through contracted services.

Performance Goal #3: The suspension rate for students with disabilities will be less than 3.3 of the suspension rate for regular education students.

Concern regarding the possibility of disproportionate suspension rates for students with disabilities has existed since at least the 1994 Office of Civil Rights, *Elementary and Secondary Compliance Reports*. Beginning in 2000, the Felix Consent Decree Court Monitor and Plaintiffs’ Attorneys expressed concerns relative to the suspension of students with disabilities. The Felix Monitoring Office, *Suspension Study*, prepared under the direction of the Court Monitor reported findings of an in-depth study of the relative suspension rates of regular and special education students. Those findings over a four year period illustrated a wide range of suspension rates over geographic and school specific characteristics. General trends indicated that the overall suspension of students was decreasing but students with disabilities were more likely to be suspended.

Between 2001 and July 2003, the Department reported to the Court Monitor, Plaintiffs' Attorneys, and the Court the relative increase risk rate for suspension of special education students. However, the Court Monitor questioned the applicability of using as a target the 3.3 rate reported in the Government Accounting Office (GAO) report of 2001 based on serious misconduct and a special study was conducted. Those findings are reported in the July 2003-September 2003 Quarterly Performance Report. The findings indicated that most schools, especially elementary schools do not suspend any, or very few, students with disabilities but that wide variation continued to exist across geography and even within schools with similar characteristics among secondary schools. Subsequently, Department efforts increasingly utilize school specific action plans to address the use of suspension as a response to student misconduct.

Cumulative Suspension Rates	SY 2001-2002	SY 2002-2003	SY 2003-2004	3 rd Qtr 04-05*
Regular Education				
Enrollment	160,494	163,309	170,283	176,313
Suspensions	13,358	10,106	9,338	6,978
Percent per 100	8.3	6.19	5.48	3.96
Special Education				
Enrollment	23,428	24,050	23,480	23,483
Suspensions	6,627	4,376	4,241	3,203
Percent per 100	28.3	18.2	17.8	13.64

* Cumulative through 3 quarters.

The data does indicate that school specific interventions are continuing to lower the rate of suspensions for all students although special education suspensions continue to be more frequent. The following table portrays the aggregate cumulative suspension for all schools under this format.

The school specific suspension data is set forth in the *Stipulation for Step-Down Plan and Termination of the Revised Consent Decree* dated April 15, 2004. This report format calls for school by school reporting of the "percentage of suspensions of regular education and special education students per hundred, ..." (page 9). The information is available through the DOE website under Reports, Felix (<http://165.248.6.166/data/felix/index.htm>).

Performance Goal #4: 99.9% of students eligible for services through special education or Section 504 will have no documented disagreement regarding the appropriateness of their educational program or placement.

There are two sources of documented disagreements. One is a formal written complaint mechanism. By regulation, formal written complaints must be addressed within 60 days. The second is the Request for an Impartial Hearing. The decision by an Administrative Hearings Officer is to be issued within 45 days of the filing of a request.

3rd Quarter Results

The Special Education Section changed the criteria for documenting telephone complaints this quarter. Previously, a telephone call was recorded as a complaint only if the issue at hand could not be resolved. Under the new system all calls, whether referred back to the school or complex or not, are counted as a complaint. As a result the number of telephone calls identified as complaints has increased dramatically to 42. The number of written complaints continues to be low at only 1. A further refinement of the system will be completed during the fourth quarter to allow the Department to further disaggregate this number to determine complaints verses dissatisfaction or confusion. The Department has met this goal during this quarter, as 99.9% of the students receiving services during this quarter had no documented disagreements.

Complaints

The number of formal written complaints regarding the delivery of mandated services and supports to students continues to be low. The continued decrease may be in response to the active complaints investigation and resolution initiatives by the Special Education Section.

Number of	3 rd Qtr SY 02-03	3 rd Qtr SY03-04	3rd Qtr SY04-05
Written Complaints	0	2	1
Telephone Complaints	12	13	42

Requests for Impartial Hearings

The number of requests for impartial hearings increased steadily from 1997 to 2002, at which point it stabilized. An analysis of requests for impartial hearings and the outcomes was submitted to Court in June 2003. In spite of the Department efforts to increase facilitation and mediation resources available to schools as an initial step to assist parent and school problem solving related to the provision of specialized instruction and related services, these services are voluntary on the part of the parents.

Table #15: Number of Requests for Impartial Hearings

Month	SY 01-02	SY 02-03	SY 03-04	SY04-05
January	13	13	10	11
February	19	9	12	12
March	9	11	17	23
Total	41	33	39	56

The overall number of requests for hearings was somewhat less last school year, 169 as opposed to 174 the previous two years. There are

168 requests this school year to date.

On February 7, 2005, the Special Education Section (SES) developed a "Due Process/Complaints" report for every school (including charter schools) in the department. Each report listed the school's due process hearings, telephone complaints and written complaints for the past two and a half years from July 1, 2002 through December 31, 2004. The specific data included the school year, student, issues involved, and disposition of the case. The school reports were aggregated into a complex report, district report and statewide report.

All school reports were analyzed for trends or numbers. Twenty-nine (29) schools were identified by the SES as requiring assistance in reducing the number of due process cases or addressing issues of systemic noncompliance. The superintendent distributed the applicable school reports to the complex area superintendents for review and appropriate action with the understanding that the SES will follow up to assess impact on the school performance.

Reducing the number of requests for due process hearings has proven problematic for the Department. While the request for an impartial hearing is a legitimate option for parents in determining the appropriate educational and related service, it is difficult to determine what, if any, school specific actions may have adequately addressed the issue prior to the request. Most requests are for placement at a non-DOE site and involve students and their families familiar with the impartial hearing process. Thus, whether the request is the result of poor communication regarding the school's offer of a free and appropriate public education, inadequate programs and services, or a parental default strategy to gain an *a priori* determined preferred educational placement is difficult to determine. Certainly, the Department is determined to reduce the number of requests as requests for impartial hearings are a drain on resources and make future program development between parents and school staff even more difficult.

Performance Goal #5: The rate of students requiring SBBH, ASD, and/or Mental Health Services while on Home/Hospital Instruction will not exceed the rate of students eligible for special education and Section 504 services requiring such services.

As can be seen in the table below, the number of students placed in H/HI due to social or emotional needs is similar to the 3rd quarter of the last school year and similar to the year prior.

Number of Students Placed on H/HI due to Social Emotional Reasons

Quarter	3 rd SY02-03	3 rd SY 03-04	3 rd SY 04-05
Number of Students	17	11	12

The number of students receiving Home/Hospital Instruction (H/HI) fluctuates but is within the range of numbers in similar quarters of the previous two school years. The table on the following page shows the number of students on H/HI and the number of students with disabilities on H/HI during the 3rd quarter of the last two (2) school years. Of the 51 students with disabilities on H/HI, 5 (<10%) required SBBH services. The percentage of students with disabilities in other educational arrangements with either SBBH or Mental Health in their educational plans is 30% statewide. This goal is met.

Number and Percentage of Students with Disabilities on H/HI

Quarter	3 rd Qtr SY 02-03	3 rd Qtr SY 03-04	3 rd Qtr SY 04-05
Total # students on H/HI	232	199	206
# Students with disabilities on H/HI	125	80	51
% Of students with disability on H/HI requiring SBBH or Mental Health	14%	13.7%	24%
State % of students with disabilities receiving SBBH or Mental Health	33%	27.8%	30%

Performance Goal #6: 100% of complexes will maintain acceptable scoring on internal monitoring reviews.

Numerous Internal Monitoring Reviews were conducted this quarter. Please refer to Section II, Internal Monitoring for detailed information regarding the scores for complexes monitored during the 2nd Quarter. Of the 21 complexes reviewed, 18 (86%) scored 85 or better on the Systems Review. On Child Status, 19 of 21 (90%) scored over 85. This is not 100% but cumulatively from last year there is improvement from 6 complexes not meeting expectations to only 4. This is markedly better than the last two years.

Performance Goal #7: 100% of the complexes will submit internal monitoring review reports in a timely manner.

All internal monitoring review reports required during this quarter were received in a timely manner.

Performance Goal #8: State Level feedback will be submitted to complexes following the submittal of internal monitoring review reports in a timely manner.

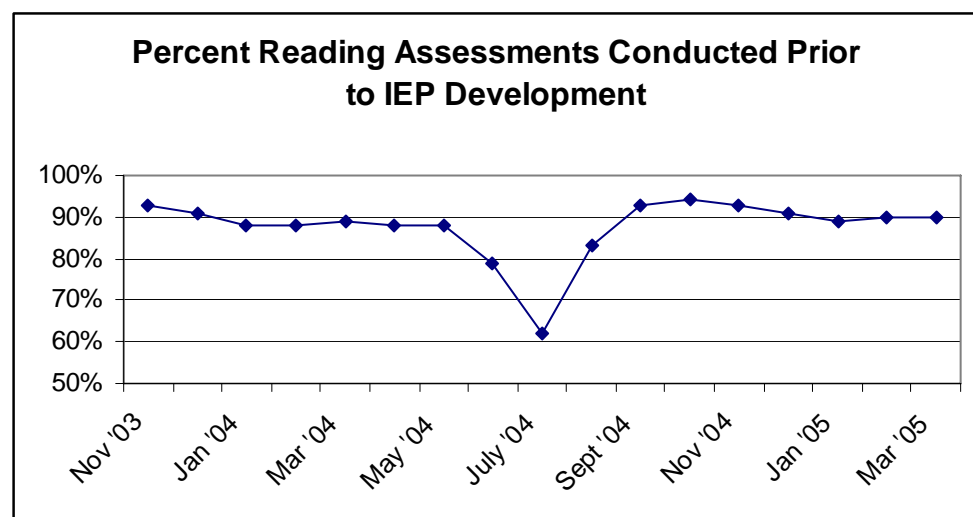
Complexes have received State Level feedback on Internal Review Reports. ~~There were no plans this quarter that were required to be resubmitted. The~~

quality of complex action plans continue to improve.

Performance Goal # 9: "95% of all special education students will have a reading assessment prior to the revision of their IEP."

The Stanford Diagnostic Reading Test (SDRT) is the reading assessment used prior to the annual revision of the IEP. It is recommended that the assessment be administered within 90 days of the IEP. The SDRT is a group-administered, norm-referenced multiple-choice test that assesses vocabulary, comprehension, and scanning skills. The SDRT is not, nor is it intended to be, an adequate measure for a complete understanding of the student's PLEP. This is because, although diagnostic, the SDRT also falls into the category of summative assessments. A summative assessment is generally a measure of achievement or failure relative to a program or grade level of study.

As depicted in the graph below, the compliance rate falls short of the Department's goal. However, with the exception of the summer months in which many IEPs are developed for newly arriving students and thus there is no time available for reading assessments, the performance rate is steady and markedly better than preceding years.



Schools with consistently poor data are being identified by the Special Education Section and are being given targeted assistance. Complex and district staff are being given data on the performance of schools and contacted for additional assistance to aid schools in meeting this goal. A closer look at the specific cases reveal general concerns, which the Department is targeting. For example, a concern with many secondary schools is how to test drop outs or no shows when the student is not physically present to test. A number have also been tested at 91 days, when the teacher didn't take into account months which have 31 rather than 30 days. Still another common error is inputting errors when revisions rather than reviews are done. ISPED had been looking at the revision rather than the review date if the teacher

didn't update the Key Dates in ISPED. Schools have been advised to correct these inputting errors.

Performance Goal# 10: 95% of all special education teachers will be trained in specific reading strategies.

Last school year this target was met as 246 of 248 new teachers received training in specific reading strategies to assist special education students become proficient readers. This SY there are 390 new special education teachers, all have been trained by the Reading Specialists.

Performance Goal #11: 90% of all individualized programs for special education students will contain specific reading strategies.

To determine the degree of compliance with this expectation, Reading Resource Teachers in the Special Education Section randomly selected 10 IEPs per complex written during the month. The selected IEPs are reviewed for evidence of the inclusion of specific reading strategies.

This performance indicator is met. This performance indicator has been met since September 2003.

Reading Strategies in IEPs	Jan '04	Feb '04	March '04	Jan '05	Feb '05	March '05
% with reading strategies	93%	93%	93%	98%	96%	96%

Performance Goal #12: System performance for students with Autism Spectrum Disorder will not decrease.

The Department uses data generated in the Internal Review process to provide an indicator of system performance related to students with ASD. During this quarter the complexes reviewed twenty-two students with an eligibility of ASD. Overall, the system performed at 95%, well above the 85% acceptable rating.

All indicators had acceptable findings under Child Status. All but two indicators had acceptable findings under Current System Performance (see table A). Fifteen of the twenty-two cases were rated as having substantially acceptable or optimal service results in System Performance. All but one case was rated as acceptable.

Comparison of Internal Review Ratings for Students with ASD

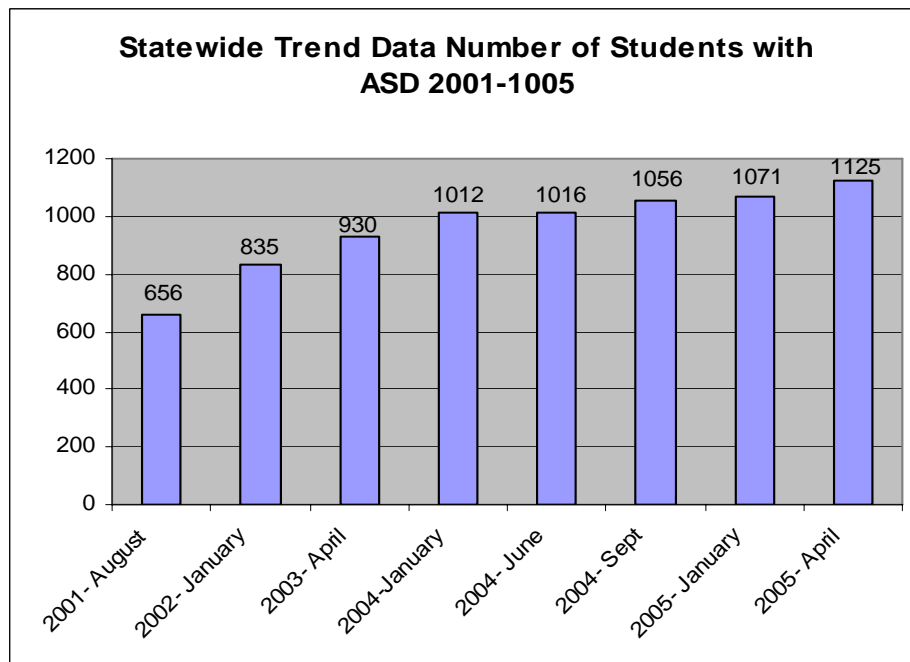
Indicators of Current Child Status	Oct. 02 - March 03	Jan. 04-March 04	Jan. 05 - March 05
27. Learning Progress	100	100	95
28. Responsible Behavior	100	100	91
29. Safety (of the child)	97	95	95
30. Stability	95	90	91
31. Physical Well-Being	97	100	95
32. Emotional Well-Being	100	95	95
33. Caregiver Functioning	100	100	95
34. Home Community (LRE)	100	100	100
35. Satisfaction	97	95	95
36. OVERALL CHILD STATUS	100	100	95
Indicators of Current System Performance			
Understanding the Situation			
44. Child/Family Participation	97	95	100
45. Functioning Service Team	100	100	95
46. Focal Concerns Identified	100	100	91
47. Functional Assessments	97	100	95
48. OVER ALL UNDERSTANDING	100	100	95
49. Focal Concerns Addressed	97	100	91
50. Long Term Guiding view	92	100	91
51. Unity of Effort Across Agencies/Team	89	100	86
52. Individual Design/Good Fit	100	100	95
53. Contingency Plan (Safety/Health)	79	89	0
54. OVER ALL PLANNING	97	100	95
55. Resource Availability for Implementation	100	100	91
56. Timely Implementation	100	100	91
57. Adequate Service Intensity	100	100	95
58. Coordination of Services	97	95	91
59. Caregiver Supports	100	100	100
60. Urgent Response	100	89	0
61. OVERALL IMPLEMENTATION	100	100	95
62. Focal Situation Change	100	100	95
63. Academic Achievement	100	100	91
64. Risk Reduction	100	100	95
65. Successful Transitions	97	95	95
66. Parent Satisfaction	97	95	100
67. Problem Solving	100	100	86
68. OVERALL RESULTS	100	100	95
69. OVERALL PERFORMANCE	100	100	95

There are two indicators in System Performance with a rating of zero percent, Contingency Plan and Urgent Response. Only three students were rated on these two indicators and all had a rating of three, below acceptable. The concerns for these students were varied and have been addressed by the schools. Contingency Plan and Urgent Response were not applicable for the other nineteen cases, thus the rating is based on only three students.

In October 2004, the Department released the Request for Proposal's (RFP) to solicit contracts with private agencies for services the Department does not have the capacity to provide. The Department has evaluated the responding agencies proposals and notification of provider selection was completed on March 31, 2005. Training for complex and school staff regarding the new contracts has begun. These contracts will become effective on July 1, 2005.

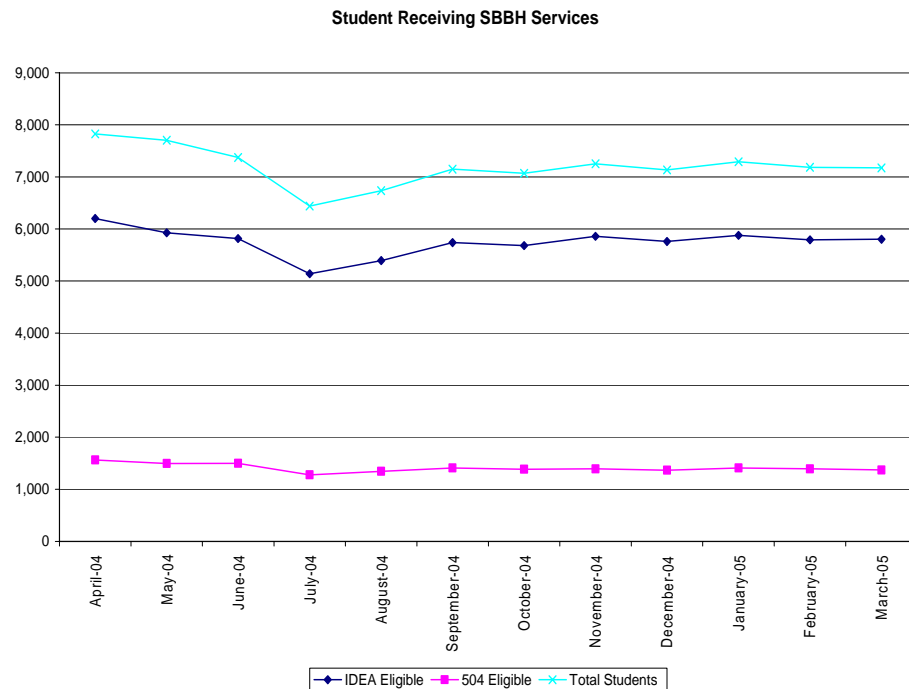
The Department has disseminated its parent training series to each of the districts. The training series includes various topics, some of which are overviews of autism and Aspergers, stress and anxiety in students with ASD's, developing social skills, managing transitions, toilet training, and sibling relationships.

Central District's pilot project to increase the number of DOE employees providing services to students with ASD is moving ahead and the District is beginning to hire Behavior Specialists and paraprofessionals.



Performance Goal #13: The SBBH Program performance measures regarding service utilization will be met.

IDEA/504 Students Receiving SBBH Services



On average, over the past year, the IEPs and Section 504 Modification Plans of over 7,000 students indicate the need for SBBH services. The ratio of IDEA students to 504 students receiving SBBH services is relatively stable over time at 80% IDEA and 20% 504. Each year there is a slight drop in the number of students receiving services through the summer months. This is expected as services are delivered to support the student to benefit from specialized instruction deemed necessary to achieve high academic and behavioral standards.

Although the ratio of students with IEP and 504 MP related SBBH services has remained constant for three quarters, the average number of students reported as receiving those services has declined slightly. As predicted in December 2000, as SBBH services are available within the Comprehensive Student Support System (CSSS), more students are supported with CSSS levels 1 to 3 school interventions and supports; this results in fewer students requiring interventions that are more intensive. As the CSSS database is refined and fully implemented, data will be available to track the effectiveness of lower level interventions. Unfortunately, both Family Guidance Center staff and District personnel have noted that students receiving intensive services present problems with increasing complexity and severity.

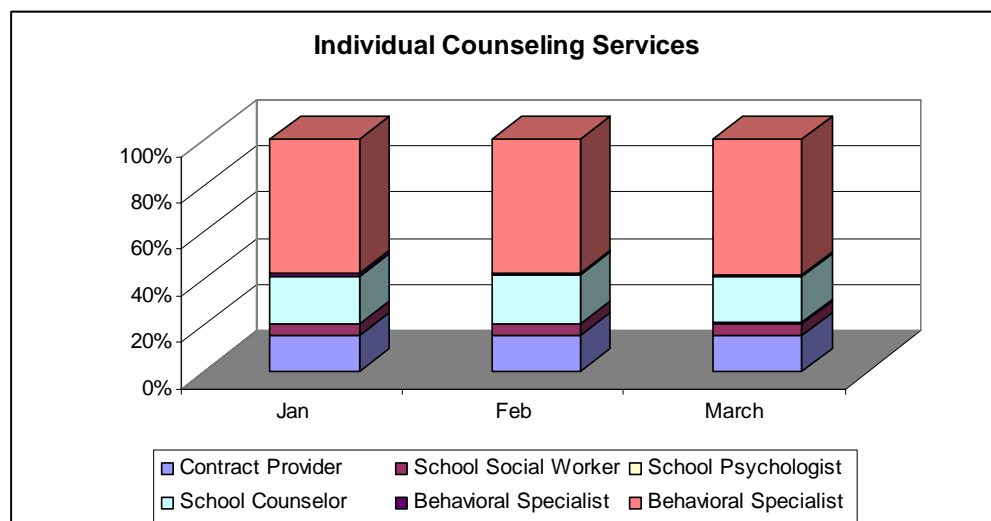
Types of Services

SBBH Students/Services SY2004-2005						
MONTH	Total # of SBBH Students	Individual Counseling	Group Counseling	Family Counseling	Med. Mgt.	CBI/ TC/ ELC
Average 1st Qtr	6,775	5,755	750	846	949	230
Average 2nd Qtr	7,151	6,319	845	824	1,042	229
Average 3rd Qtr	7,215	6,294	841	801	1,014	212

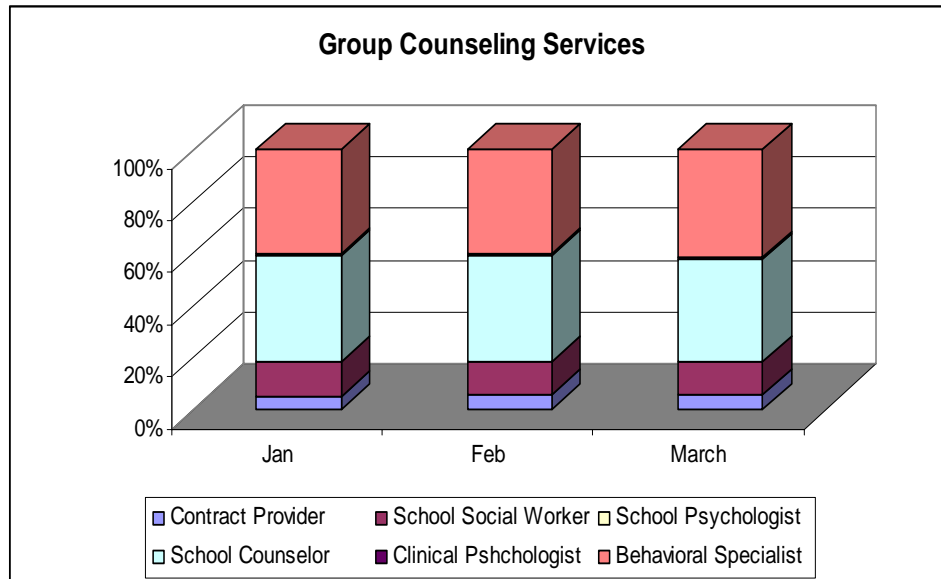
This quarter, as seen in the table above, individual counseling continued to be the most frequently used, on-going intervention for an average of 6294 students or an average of 87 percent of students in this target population. This is consistent when compared to the 85-88% average of the previous two quarters. There is a 1% decrease in the number of students in intensive DOE programs compared to a year ago. Overall, ratios for types of services provided were similar for the past year, with the most change noted in the five percent decrease in students who received family counseling as a service. Performance Goal 15 discusses training issues related to family counseling .

Comparison of SBBH Providers

As seen in the following graphs, the Department of Education staff continue to provide most interventions with the exception of family services that are often delivered by contracted providers. This pattern is consistent over the past two years.



DOE staff continue to provide an average of 85 percent of the individual counseling, an increase of 6 percent as compared with data from a year ago, with a corresponding 5 percent decrease in contracted providers delivering individual counseling. Of the DOE providers, Behavior Specialists continue to deliver the bulk of individual counseling (58%) and counselors 20 percent of the individual counseling as compared to 57 and 21 percent, respectively, last quarter. Department expectations, as stated earlier in the Infrastructure Indicators Section, continue to be that 80% or more of SBBH services will be provided by DOE staff.



DOE staff have been the primary provider for 95 percent of group services. Social Workers continue to provide more group services as reflected in the 7 percent increase from nine months ago. They now provide 13 percent of group services while last quarter they provided 11 percent which was yet another percent increase from the previous quarter. Behavior specialists and counselors almost equally provide 81 percent of group services, a two percent decrease from last quarter in contrast to previously providing an average of 36 and 47 percent, respectively. This was a significant shift when compared to nine months ago when counselors provided 68 percent and behavior specialist provided 27 percent of group services. It may be deduced that counseling professionals from different role groups are increasingly providing the counseling services as aligned with CSSS.

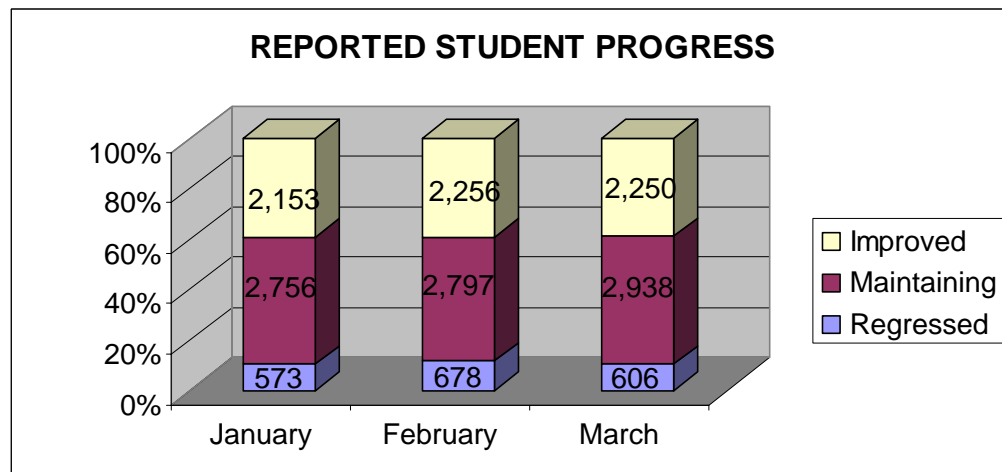
Contracted providers are the primary providers of family counseling services, 71% this quarter, in contrast to 73 percent last quarter. Again, this pattern is consistent with previous years, it is primarily due to the flexibility in scheduling meetings and sessions for family convenience.

Focus of Services

Based on a comparison of the past year's data on the focus of services for SBBH students, results were generally similar with only a one to two percent

fluctuation. Approximately, 18% of students required services to develop Attention/Organizational skills, 23% Cooperation/Compliance skills, and 20% Social Skills. Students whose primary focus is the development of emotional/coping skills have consistently comprised the largest group, approximately 38%. The reader is directed to the Implications for SBBH Practice section under Performance Goal #14 for the alignment between the focus of SBBH services and indications from the BASC-2 assessment instrument. Data has been consistent for the past year.

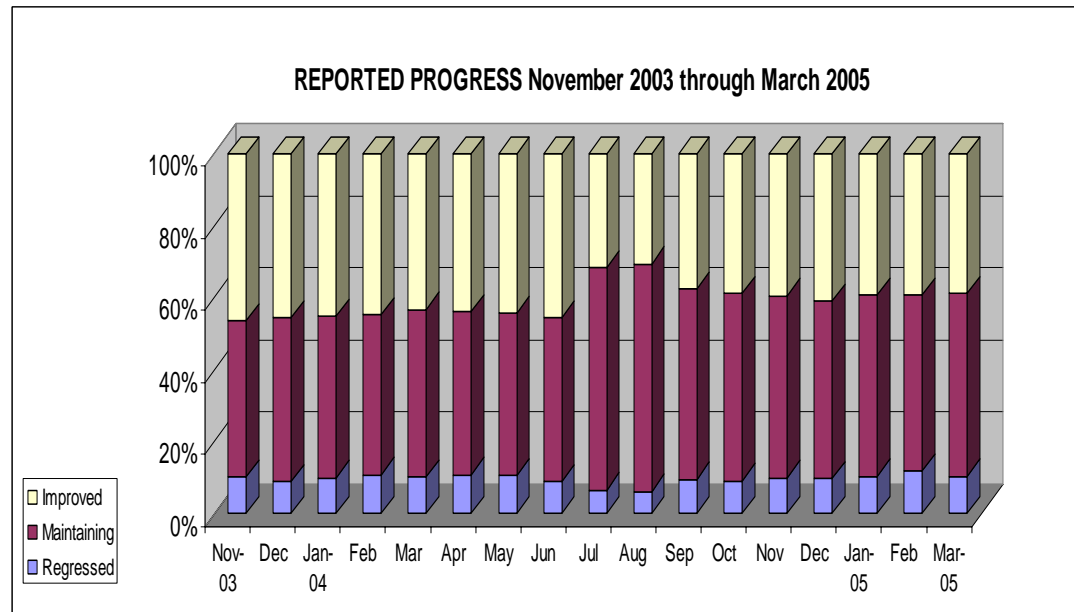
Reported Student Progress



Rates of students maintaining or showing progress in meeting behavioral goals and objectives is shown above. The number of staff who reported student progress continues to increase each month. The percentages with progress levels reported increased from 43 percent in July 2004 to 67 and 74 percent in the following months of August 2004 and September 2004, respectively, to 75 percent last quarter, and 81 percent at the end of the current quarter. Although these numbers represent a portion of the student population who receive SBBH services, they were, nonetheless, positive indicators that the majority of students were maintaining or making progress. With the implementation of the BASC-2 rating scales, progress indicators will be quantifiable and systematic. (Please refer to performance goal 15.)

Review of the data for the past year reveals consistent ratios with the exception of the summer months when services are provided primarily to students who require Extended School Year Services. Although reported student progress is a subjective measure, the data indicates that continued monitoring is warranted. With the implementation of the BASC-2 this quarter, along with focused trainings, the collected data can and will be utilized by SBBH staff to focus on student needs, writing measurable goals and monitoring student progress toward reaching those goals, based on data. Statewide training, district by district, has focused on the development of measurable goals and objectives, as well as, strategies for achievement of the necessary skills and monitoring of progress to include quantifiable data collection for each student. Increase in the percentage of students making improvement is anticipated in the coming quarters as services are delivered and staff training focuses on collecting and interpreting BASC-2

and other data, and utilizing the information to develop and attain measurable IEP/MP goals and objectives. This is further detailed in the report under Performance Goal 15.



The data depicted in the graph above is deemed to be a conservative report as the numbers are reflective of the students served during a specific month. Students who have made progress and who no longer need the services are not reflected in the following month's data. Consequently, the above information should be considered along with data on the number of students who are new or exiting from SBBH as a related service.

Students receiving SBBH as an IEP/MP Related Service: Exits and Entrances

In the not to distant past, the number of students receiving SBBH type services only increased as the tendency was that once a need was identified the service was provided until the student either graduated or left the Department. This is no longer true.

Each month schools report why SBBH students enter or exit their SBBH program. The data log differentiates between those students who are newly identified as needing SBBH as an IEP/MP related service (New) from those students who already were receiving IEP/MP related SBBH services but are new to a provider or school (Transferred In). Students who have "Met Goals" by either achieving their goals or graduated, or those who moved, terminated the service, or no longer require SBBH support as a related service are categorized under Exit.

As can be seen in the table on the following page, a total of 522 students were *newly identified* as needing SBBH services this quarter in addition to 608, 482, 622, 724, and 498 in the preceding quarters. Referrals are again anticipated to increase, peak, and then taper in the next two quarters. 308 students met goals during this second quarter of the school year in contrast to the 269, 378, 694, 350 and 379 students who met goals and/or graduated in previous quarters. That is, *due to attaining success, 1649 students have exited the program in the past year. Due to achieving educational goals, 2478 students have exited the programs since September 2003.*

Data continues to reflect much movement of students into or out of service, or among DOE schools. 359 students already receiving CSSS level 4 and 5 SBBH services transferred between schools during the current quarter. Last quarter 503 transferred, with 3,041 SBBH students transferring to SBBH services in other schools during the prior 16 months in Table 9. This means that SBBH staff, statewide, are continually challenged with developing relationships with new students and parents, understanding student needs, and developing plans and services needed to transition students into, between, or out of schools. The following data indicates that the DOE system is highly fluid and not static, as new students are continually identified as needing services while others exit due to having met goals and attaining success or for other reasons.

STUDENTS RECEIVING SBBH AS IEP/MP RELATED SERVICE: ENTRANCE AND EXIT					
	New to SBBH	Transferred in	Met goals/ Grad.	Moved	Parent Decision
Sep-03	111	226	160	353	42
Oct	126	102	76	129	24
Nov	208	179	181	226	66
Dec	164	136	122	154	54
Jan-04	235	208	118	240	53
Feb	248	171	119	231	54
Mar	241	169	113	196	46
Apr	247	156	151	197	46
May	217	134	185	153	45
Jun	158	96	358	153	52
Jul	149	290	186	227	42
Aug	233	533	132	174	25
Sep	100	138	60	58	10
Oct	172	203	59	110	26
Nov	222	159	79	152	28
Dec	214	141	71	144	20
Jan-05	225	139	119	188	30
Feb	167	137	103	158	22
Mar-05	130	83	86	99	4

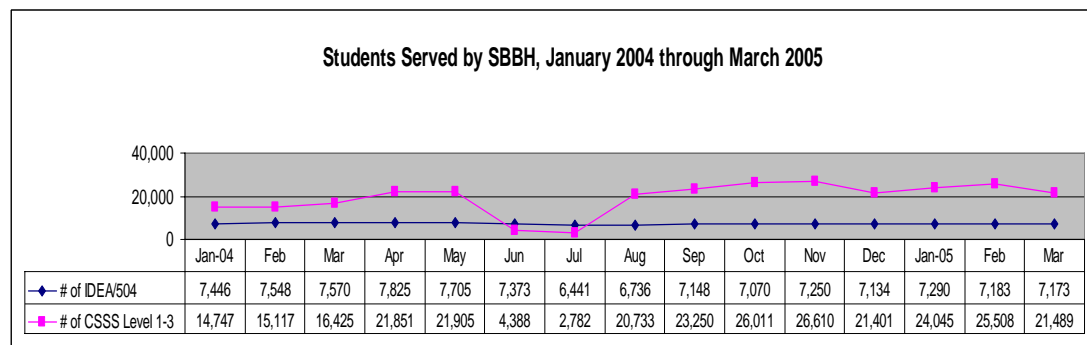
The average number of students who received these services does not cumulatively equal the total number of students served. As mentioned in a previous report, statewide monthly totals appear to have a consistent pattern over past 18 months. During FY 03-04, the SBBH program provided an average of the 7,508 IDEA/504 students with SBBH related services each month. However, because of student turnover, services were provided to a significantly greater total number of students

than the average indicates. Month by month inspection shows a steady influx of new students receiving IEP/MP related SBBH services, as well as, students who exited when they attained success in meeting behavioral and educational goals.

Early Intervention Services

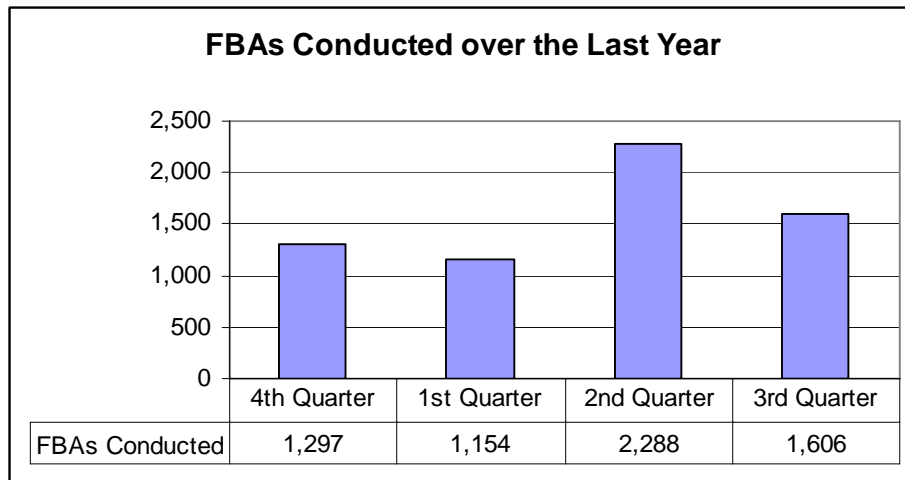
In the context of the CSSS system and the array of supports, DOE personnel who provided the services for Felix-class students also provided early intervention services for Non-Felix-class students. During this quarter SBBH assistance to classroom teachers for 71,042 non-IDEA/504 students was provided. This is in the form of consultation, observation, classroom guidance instruction, functional behavioral assessments/behavior support plans, walk-in counseling, and other assistance. Intervention services during this quarter were much higher when compared to 74,022 students served last quarter, 46,765 students served during the summer months and early school year, and 48,000 non-disabled students served in the April through June 2004 quarter. The same staff providing SBBH services to Felix-Class students including counselors, behavior specialists, social workers and psychologists also reported statewide provision of 53,305 hours of early intervention SBBH services during this quarter. These services included individual, classroom, and consultation supports. This is in addition to CSSS level 1 to 3 supports and services provided by other counselors who do not serve Felix-Class students.

It is worthy to note in Table 12 that early intervention services to CSSS level 1 to 3 students increased steadily from January 2004 when data collection began, until February 2005. As one would expect there is a decrease during the summer months, the partial school month of December, and in March when spring break occurred. Also notable is that the number of students receiving SBBH IEP/MP or IDEA/504 related services has remained relatively stable, indicating that more students are accessing services earlier. Effort is evident in the provision of early intervention services. Data reflects system responsiveness based on the numbers of non-disabled students accessing services, indicating awareness, identification, and utilization of School-Based Behavioral Health supports across the levels of CSSS to meet students' needs as soon as possible.



An important SBBH service is conducting Functional Behavioral Assessments (FBA). An FBA provides early intervention information that allows teachers, other staff, and caregivers insight regarding unproductive student behaviors and changes necessary to increase more adaptive behaviors that support student achievement. As can be seen in the graph below, significant numbers of FBAs continue to be

conducted. The pattern is consistent with expectations, fewer in summer months, 1st Quarter, and an increase as school gets underway in the fall, 2nd Quarter.



Performance Goal # 14:

- a) 60% of a sample of students receiving SBBH services will show improvement in functioning on the Teacher Report form of the Achenbach.
- b) Student functioning as described on the Achenbach TRF scores on students selected for Internal Reviews will be equivalent to those of a national sample.

New Performance Goals (described 2nd Quarter SY04-05)

- a) 60% of all students receiving SBBH services will show improvement in functioning on at least one scale on the Teacher Rating Scales (TRS) form of the BASC-2.
- b) A “Measurable Goals and Progress Monitoring” pilot project will be implemented in at least one complex during the last quarter of the current school year.

Progress Toward Reaching Performance Goal A

Consistent with the goal of continuous SBBH program improvement, a substantially better model of SBBH program evaluation was developed and introduced in the third quarter report for school year 2004-2005. Improvements noted include:

- The tool used to measure progress was changed to the Behavioral Assessment Scale for Children-Second Edition (BASC-2) Teacher Rating Scale (TRS), which is more appropriate for monitoring progress in the school setting.
- Rather than using data collected to monitor SBBH program effectiveness only, the same data is now used to inform the team about every student's individual progress and needs.
- Instead of collecting this data on a 10% sample of the students receiving SBBH services, the progress of **all** of these students is **continuously**

monitored to assure students are making progress.

- Data collection is integrated with program events, such as, entry into counseling as a related service and annual and quarterly reviews.
- These changes provide more useful and reliable comparisons for monitoring individual student progress as well as overall SBBH program effectiveness.

Data Collection Model

The new data collection model provides information of value at the school level to enhance services for **all** students receiving IEP/MP related SBBH services, and resulting data is aggregated to assess the overall SBBH program effectiveness.

The following procedures for the new model of data collection began January 3, 2005:

- All applicable components of the BASC-2, including the Self Report of Personality (SRP), Parent Rating Scales (PRS), Teacher Rating Scales (TRS), Structured Developmental History (SDH) and Student Observation System (SOS) are administered for all new students as they begin counseling as an IEP/MP related service.
- The BASC-2 TRS and SOS are administered and the SDH is updated for all IEP/MP students receiving SBBH services at the time of each annual review of the IDEA/MP service plan.
- Following entry into IEP/MP related SBBH services or the annual review, the SOS is administered each quarter.
- The TRS and SOS are administered when considering discontinuation of counseling as a related service.

This new procedure uses all components of the BASC-2 to obtain a baseline measurement of each student's functioning when IEP/MP related SBBH services are initiated. More importantly, the use of the multidimensional BASC-2 at that time also enhances the school team's understanding of the individual student for development of the initial service plan. The service plan includes counseling goals, as well as other supports and interventions needed for that student to be successful. BASC-2 findings are expected to contribute to optimization of such planning.

Administration of the TRS and SOS at the time of the annual review of each student's IEP/504 Modification Plan provides an objective measurement of progress from the previous baseline. This information is available at a time when the entire team is meeting for the specific purpose of designing the plan for the coming year. Note that two complimentary types of data collection are collected. The SOS data, which is very sensitive to small changes in behavior, is collected at least quarterly to monitor student progress. This data helps counseling providers make decisions about continuation/change of interventions based on the student's response. The TRS is an impressionistic scale, which measures psychological functioning in a broad range of dimensions. This is used for identifying changes in the student's functioning for informing the Present Level of Educational Performance and for setting goals in the IEP. TRS data is also the measure of progress used for SBBH

Program monitoring.

The TRS is also administered when considering discontinuation of counseling as an IEP/MP related service to assure that data supports that service is no longer needed. This data also provides a measure of the student's current functioning to compare with their baseline functioning at the time services were initiated. This comparison will also be aggregated and reported as a measure of SBBH Program effectiveness.

Because the BASC-2 is administered when IEP/MP related SBBH services are initiated or reviewed, it is envisioned that within a year **all** students receiving these services will have the applicable components of the BASC-2 completed.

BASC-2 Data Available for Reporting

Statewide BASC-2 data collection and compilation were significantly challenged by unforeseen difficulties. Several times this quarter, American Guidance Services (AGS), the developer of the software, delayed installation and testing of the BASC-2 client-server software. To facilitate resolution of these problems, AGS sent their software consultant to Hawaii in March so he could work directly with technical support staff from the Department of Education in resolving these problems. Significant progress has been made in assuring that this software incorporates features needed to assure data is obtained in a way that is user friendly, efficient and in a format that allows for the types of analyses needed to meet all of our program evaluation goals. The projected date for testing of this software is April 20, 2005, and ten DOE staff will participate in this testing. All staff providing counseling as a related service will begin to connect to the server starting May 23, 2005.

Meanwhile, to expedite implementation, the individual user version of the BASC-2 scoring software was used for the first quarter of 2005, and the data was aggregated for analysis at the end of the first quarter of 2005. As a result, some data was not forwarded to SBBH State Office and was not included in the current analysis. This problem will be resolved when the client-server version of the computer program is released.

Beginning at the end of the next quarter, the data for all applicable components of the BASC-2 for students entering IEP/MP related SBBH services will be summarized separately. This will provide a profile of types of problem areas that lead a student to be referred for Comprehensive Student Support System (CSSS) level 4 or 5 services. This information has several important implications for program development:

- Future training will focus on empirically-based interventions for these problem areas.
- These findings will be shared with PSAP and other programs that support student achievement in CSSS levels 1, 2 and 3 to assist them in identifying problem areas that are not being resolved at these earlier levels.
- This data assists in SBBH program management. For example, if a large number of students demonstrate social skills problems, then additional group

interventions to address this specific need may be added.

- This data will help identify system problems that can be addressed more appropriately at that level.

TRS scores for all students who had annual reviews will also be reported separately in the next quarterly report. This will provide a profile of the types of problem areas that lead students to remain in services for longer-term intervention. This information will identify areas where we may need to improve our services, and informs us when we have made progress:

- Data will be used to provide support to identified districts, complexes, schools and individual counseling providers who are having low rates of student progress.
- Review programs to assure that empirically-based interventions are being used to address these problems.
- Provide training to address empirically validated interventions for the problems where we are being least effective.
- Data will be used to identify districts, complexes, schools and individual counseling providers who are having high rates of success so we can identify critical factors which can be applied by others to improve their rate of success.

Due to challenges noted above, the following data, collected on 315 students, includes both new students just entering counseling as a related service and others who had an annual review during the first quarter of 2005. This data should be considered appropriate for understanding the needs of students from across the state of Hawaii currently receiving SBBH programming in a more general way. Data from a number of cases sufficient for individual district analysis is not yet available, but it is predicted that the data should be available and appropriate for district analysis by the time the next quarterly report is written.

Summary of High Frequency of At Risk Scale Elevations on BASC-2 Scales

SCALE	TRS-C	TRS-A	PRS-C	PRS-A	SRP-C	SRP-A
Attention	Yes	Yes	Yes	Yes	Yes	Yes
Anger Control	Yes	Yes	Yes	Yes	Yes	Yes
Developmental	Yes	Yes	Yes	Yes	NA*	NA*
Low Resiliency	Yes	Yes	Yes	Yes	NA*	NA*
Study Skills	Yes	Yes	NA*	NA*	NA*	NA*

* This clinical scale is not included on this rating scale

Summary of Low Frequency of At Risk Elevations on BASC-2 Scales

SCALE	TRS-C	TRS-A	PRS-C	PRS-A	SRP-C	SRP-A
Somatization	Yes	Yes	Yes	Yes	NA*	Yes
Anxiety	Yes	Yes	Yes	Yes	No	Yes
Test Anxiety	NA*	NA*	NA*	NA*	NA*	Yes

*This clinical scale is not included on this rating scale

Implications for SBBH training, program development and further research

Based on these findings, five primary problem areas should be targeted for further investigation. This inquiry should include identification of prevention and early intervention services for students in earlier levels of CSSS, current interventions provided to resolve these problems through SBBH services, and relationships between these problems and success in school.

The following scales had a high frequency of “at risk” elevations:

- 1) Attention problems on all scales completed by teachers, parents and students at both age levels (adolescent and child).
- 2) Anger Control on all scales completed by teachers, parents and students at both age levels (adolescent and child).
- 3) Developmental Social Disorders was noted on all scales that measure this problem including parent and teacher ratings at both age levels (adolescent and child).
- 4) Low levels of Resiliency on all rating scales that measure this factor including parents and teachers at both age ranges (adolescent and child).
- 5) Study skills problems were identified by teachers at all grade levels. This scale is not included in the parent or student scales.

Factors underlying these problems and empirically-based interventions should be included in the professional development plan. SBBH programming should be evaluated to determine if current services for students who exhibit these problems include those found to be most effective for attention problems. SBBH staff should meet with school staff to review these findings and to assist them in assuring that consultation for teachers includes techniques found to assist students with these problems in the regular classroom. This is important to maximize the probability that problems will be remediated before more restrictive placement is needed.

Further analysis of current data

Complete analysis of current data could not be completed for this report. However, this analysis will continue on an on-going basis, and findings will be included in the next quarterly report. This is expected to include:

- An analysis of the distribution of number of scale elevations per student
- Separate analyses of students just entering counseling as a related service and students who have been receiving this service for a year or longer

A plan will also be developed for integration with other data bases currently available to allow for analyses of relationships between the scales and scale combinations on the

BASC-2 and important student outcome, such as:

- Current grades
- Scores on group achievement tests
- School disciplinary actions
- Restrictiveness of placement

Plans for future data analysis to further examine SBBH Program Effectiveness

Once a second TRS has been administered for a student, a meaningful comparison to the baseline can be made for the student. Although there may be a small number of students over the three quarters that will have an administration of the TRS at the time of the annual review and again as they discontinue services, it is important to note that the first quarterly report that would include a substantial number of these comparisons would be in April 2006. The first report to include comparisons between baseline and follow-up comparisons for the entire group will be in January 2007, and the whole group will be included in every quarterly report thereafter. These comparisons will be aggregated to determine if *Performance Goal 14a*, “60% of all students receiving SBBH services show improvement in functioning on at least one scale on the Teacher Rating Scales (TRS) form of the BASC-2,” has been met. A major foundation for a quantifiable system to assess program effectiveness is now in place.

Function of other BASC-2 Components not included in data analysis

The Structured Developmental History (SDH) is also being used to gather information about developmental, social and medical factors that are important when designing effective interventions. Assuring that this information is up to date is essential in putting the child’s emotional and behavioral functioning in context. Although we are not currently able to input this information so it can be used in SBBH program effectiveness analyses, the SDH information is being considered for inclusion in the ISPED student database.

The Structured Observation System (SOS) will be administered at least once each quarter to monitor student progress. This is a more sensitive measure of change in a student’s behavior than the other BASC-2 rating scales, which are based on more general impressions of the child’s behavior. Feedback on student progress is important to assure that the interventions and other support being provided is, in fact, effective for that specific child. This data directs more immediate modification of services to improve effectiveness. Although there is no systematic method for aggregating this data to provide another measure of program effectiveness at this time, this is also being considered for inclusion in the ISPED student database.

Progress Toward Reaching Performance Goal B

Performance Goal b states:

A “Measurable Goals and Progress Monitoring” pilot project will be implemented in at least one complex during the last quarter of the current school year.

This new goal was added during the fall of 2004 and reflects the SBBH Program’s commitment to improving student outcomes. As described in Performance Goal 15, state-wide training has focused on teaching counseling providers skills in writing

measurable goals and monitoring student progress toward reaching those goals. Although the data from the rating scales described in **Performance Goal a** provides broad general feedback on SBBH program effectiveness and information on resolution of behavioral health difficulties, **Performance Goal b** gives direct and immediate feedback to the counseling provider, their supervisor and the whole team on progress toward meeting individual goals identified by the IEP/MP team. These goals are specifically identified as ones that must be met so the student can be successful in meeting identified educational outcomes. Monitoring progress in meeting these goals assures that interventions are either being effective or they are modified to improve future student outcomes. This is where meaningful program improvement occurs, one child at a time.

Goal Attainment as a Measure of Program Effectiveness

Attainment of the IEP/504 service plan goals is an important measure of program effectiveness. However, collection of this data is meaningful only when goals are written in measurable terms, and objective data is collected to monitor progress. Beginning in August 2004, training in writing measurable goals and in progress monitoring was provided to all SBBH staff. This included methods for gathering data on student progress to determine when adequate progress is being attained and when goals are met. Additional follow-up training was provided for several complexes in Hawaii and Maui districts. Once these skills are more fully developed and reliable reporting of goal attainment is accomplished, utilization of this data as an additional indicator of program effectiveness will be viable.

Performance goals 14 a and b must also be linked. Behavioral health difficulties identified when the BASC-2 is administered should be targeted within the context of the student's functioning in school. Therefore, implementation of the **performance goal b** was deferred until the first phase of statewide training on the BASC-2 was completed to assure this integration.

Several complexes are using these methods and a complex demonstrating high-level skill in this area will be selected for a pilot study before the end of April 2005. That complex will be provided additional support to further develop these skills and to assure consistency in implementation. These systematic methods will then be used to further examine the effect of counseling interventions and other supports on goal attainment. If this pilot project is found to be effective in improving student outcomes, then a plan will be developed for expansion of this training into other complexes across the state.

Goal attainment data will also provide objective feedback that can be used for program monitoring and improvement. For example, we may find that we are very effective with some problem areas but less so in others. This information would be useful when targeting areas of emphasis for subsequent supervision and training.

Performance Goal #15: System performance for students receiving SBBH services will not decrease.

The Ultimate Goal: Student Achievement

A primary goal of the SBBH program is to provide the emotional and behavioral supports students need so they can achieve their academic potential. Therefore,

an indirect yet very important measure of the impact of SBBH services is the ratio of students attaining academic proficiency. Trend reports from the Hawaii Department of Education website indicate progress in this area as measured by both the Hawaii State Achievement Test and the NAEP. Improvements are noted in reading, mathematic and writing. An average improvement across grade levels on the most recent tests indicates that over 3 percent more students are achieving proficiency in reading and mathematics. Although this may not seem to be a significant change, 3 percent of the total student population is more than 500 students.

Many factors undoubtedly contributed to the increased percentage of students meeting this benchmark. However, it is notable that this improvement corresponds with the time-frame when the SBBH program became employee-based which greatly improved the stability of services. It is reasonable to assume that improved student achievement is one measure supporting the view that the SBBH program functioning is at least maintaining if not improving.

Development of a System for Continuous Self-Monitoring

“The system must be able to monitor itself through a continuous quality management process. The process must detect performance problems at local schools, family guidance centers, and local service provider agencies. Management must demonstrate that it is able to synthesize the information regarding system performance and results achieved for students that are derived from the process and use the findings to make ongoing improvements and, when necessary, hold individuals accountable for poor performance.”

- Since February 2005, the State Interagency Quality Assurance committee has expanded to include representatives from the Department of Human Services-Child Welfare, Hawaii Families as Allies, Developmental Disabilities, and Early Intervention Services. The intent is to broaden interagency collaboration and inter-systems performance between agencies who jointly serve our students by reviewing and analyzing statewide data and trends, discussion, strategizing, planning, and responding to district QA referrals.
- As described in Performance Goal 14, BASC-2 data is beginning to be utilized in the “continuous quality management process” as described in the quote from the Revised Felix Consent Decree. Based on the statewide preliminary data, we are beginning to identify areas of strength and weakness in resolving a variety of types of student problems. SBBH State Office is currently planning to meet with other programs to review this data and to develop strategies to remediate student problems at earlier levels in the CSSS continuum. These issues will also be discussed with SBBH Program Coordinators to identify strategies for enhancing the intervention skills of counseling providers for addressing these student needs.
- The data allows the identification of students who are not improving or are further regressing so that modifications in the support plan can be facilitated. Although only one administration of the BASC-2 has occurred thus far, progressively more progress data will be collected over time. The current data will be examined over the next quarter to identify students who demonstrate a high level of difficulty currently so these students can be flagged for extra

attention during supervision sessions.

- Statewide aggregate data will allow us to identify districts, complexes, schools and individual counseling providers that require additional support and training. Data has been collected on over 300 students receiving counseling as a related service thus far. When data on at least 500 total cases has been collected during the next quarter, state level examination of the data for district trends will begin.
- SBBH State Office will also be able to identify higher functioning schools and identify essential characteristics or other factors that lead to improved student outcomes. However, data on more students must be collected for reliable findings. This analysis will also begin during the next quarter.

Many critical steps have been taken this quarter to begin implementation of this monumental program evaluation, and the value of this process will become progressively greater as data is collected on additional students receiving counseling as a related service. This process is expected to gather data on more than 10,000 students over the next year.

- BASC-2 scales have been distributed to staff at all schools throughout the state.
- Individual-user BASC-2 ASSIST scoring software has been distributed, and users have been trained.
- Districts forwarded the first data set to the SBBH State Office for analysis and inclusion in this report.
- Extensive collaboration with American Guidance Services focused on the development of software that will meet the needs of students, counseling providers and program evaluation.
- SBBH State Office consulted with Dr. Cecil Reynolds and Dr. Randy Kamphaus, co-authors of the BASC-2, several times regarding the use of the BASC-2 for SBBH program evaluation.

Many steps have been taken to assure that the information is properly gathered and used to identify student needs and to systematically monitor progress .

- Trainings were provided to a variety of staff including clinical psychologists, school psychologists, behavioral specialists, school counselors, social workers, student service coordinators on implementation procedures, and administration of the BASC-2, and interpretation of findings.
- One or more psychologists from each district co-presented to help build local leadership for future supervision/consultation.
- Dr. Larry Hanken, a nationally known expert on the BASC-2 provided training

on Oahu and the neighbor islands

Consistency in SBBH Leadership

SBBH leadership continued to increase in effectiveness related to continuity of staff.

- The SBBH State Educational Specialist has been in the position since November 2003.
- The doctoral-level State School Psychologist has been in the position since May 25, 2004, and he has been full-time since August 2004.
- The masters-level State School Psychologist has been in the position since August 2003.

All district-level SBBH Program Coordinators positions have been filled and stable since summer 2004. Collaborative relationships with staff at all levels of the program were further developed through a variety of activities. The state psychologist and SBBH Educational Specialist and State School Psychologists have continued to attend staff meetings with SBBH staff throughout the state to provide the direction and support needed to resolve problems and optimize their functioning. The doctoral-level State School Psychologist held numerous trainings on the BASC-2 and other topics including participation of all SBBH staff and many staff outside of the SBBH program. This has been critical in assuring that best practices are being consistently implemented throughout the state. Consistent leadership, networking and collaboration continue to be critical in system sustainability and improvement.

State-wide Training

During this quarter, state-wide training efforts continued to target improvement of system functioning through increasing skills in the use of data collection when developing student goals and monitoring progress. The focus was primarily on the use of the BASC-2 as a multidimensional source of data including information from parents, teachers, students, and structured direct observation of students. These training are expected to continue for the next two quarters with an increased focus on interpretation and practice integrating information from the BASC-2 into IEPs/MPs and Behavioral Support Plans. Standards of Practice for considering IEP/MP related services were also developed, and training on these has begun.

1) Training on the Behavioral Assessment for Children, Second Edition (BASC-2)

Dr. Cecil Reynolds, co-author of this scale, conducted the initial training on the BASC-2 on Oahu, August 2, 2004. Since then, the doctoral-level State School Psychologist conducted additional training sessions on the neighbor islands, providing the theoretical background and basic information needed prior to using these scales.

A new training including implementation of state-wide procedures for the use of the BASC-2 for progress monitoring, administration of the BASC-2 Student Observation System (SOS) and an introduction to interpretation of BASC-2 rating scales computer reports, was provided state-wide during the past quarter.

This included a total of 27 workshops presented by the State School Psychologist on Oahu and all neighbor islands. A total of 1,072 DOE staff attended these workshops including clinical psychologists, school psychologists, behavioral specialists, family support workers, social workers, school counselors, student service coordinators, principals and 504 coordinators. Workshop evaluation ratings were 4.7 for the presenter, 4.5 for content, 4.2 for process and 4 for application on a 5 point scale.

Follow-up trainings on BASC-2 interpretation were presented by Dr. Hankin from American Guidance Services on Oahu, Maui, Hawaii and Kauai. A total of 365 DOE employees attended these workshops including psychologists, social workers, behavioral specialists, family support workers and school counselors. Workshop evaluation ratings were 4.8 for the presenter, 4.7 for content, 4.3 for process and 3.9 for application on a 5 point scale.

During the next quarter, the doctoral level State School Psychologist will be developing and piloting workshops on interpretation of the BASC-2 and use of this information for writing measurable goals and progress monitoring. Support during the implementation of the BASC-2 is being provided during statewide and district-level meetings and trainings. Technical assistance for the use of the BASC-2 is being provided through the State School Psychologists and the test publisher, American Guidance Services (AGS).

During the next two months, the State School Psychologist will also be training contract agencies and their trainers on the BASC-2 for incorporation in their service delivery to students referred for their services.

2) Standards of Practice Development and Training

During this quarter, the SBBH Educational Specialist initiated the development of ***Standards of Practice*** for SBBH services, in collaboration with the district educational specialists, the Autism Educational Specialist, and related services and special education personnel. The statewide ***Standards of Practice*** were developed to further guide teams in the process of using appropriate evidence and consultation to make educational decisions for students. The ***Standards of Practice*** were written to facilitate the delivery of quality services, and at the same time, to assure accountability and responsibility on the part of all professionals involved with the delivery of educational services.

The ***Standards of Practice***:

- Improve quality services to students
- Promote statewide consistency
- Promote Best Practices

Conform to the Interagency Performance Standards and Guidelines.

Developed within the framework of the Department of Education's Comprehensive Student Support System (CSSS), the ***Standards of Practice*** (SOP) focus on CSSS levels 4 and 5 services. School teams will utilize the SOP to assist them in collecting and analyzing data and to discuss if more information is needed for the IEP/MP teams to determine the need for a specific service. They are not to be used to pre-determine services in an IEP or to

exclude CSSS levels 1-3 supports.

Following revisions based on the review and feedback from multiple role groups, the SBBH Educational Specialist and the Autism Educational Specialist presented the *Standards of Practice* and related training to 87 District Educational Specialists statewide on March 31, 2005. With unanimous support for implementation, the State SBBH and Autism Educational Specialists have teamed with district staff and begun trainings in each district. District staff are currently rolling out SOP trainings for various role groups, such as, principals, counselors, special education teachers, psychologists, and more. Processes will be in place to ensure utilization of the SOP. It is envisioned that the utilization of the *Standards of Practice* will improve statewide system performance.

3) Training on Writing Measurable Goals and Progress Monitoring

Three years ago, Greg Llewellyn, the school psychologist who developed the "Initial Line of Inquiry," provided training on the use of this process when performing Functional Behavioral Assessments (FBA) and Behavioral Support Plans (BSP.) As a follow up, SBBH State Office contracted Dr. Llewellyn to return and conduct five presentations titled "Design and Monitoring Progress of Behavioral Support Plans" from August 9-13, 2004. A primary focus during these presentations was placed on writing measurable goals and monitoring progress toward goal attainment.

The doctoral-level State School Psychologist provided follow up trainings for West Hawaii and on Molokai . The first workshop focused on writing measurable goals to support SBBH staff in implementing these skills. Participants engaged in small-group activities that provided practice in improving goals they had written for students previously. Follow-up training was also provided that reviewed methods for monitoring student progress. This included activities in which participants practiced writing measurable goals and a plan for progress monitoring with students on their current caseload. Additional follow-up workshops will be provided next quarter for the pilot group identified in *Performance Goal 14 b*.

The SBBH State Training Coordinator has also been available to co-present with the staff who were trained as trainers throughout the state. The goal is to train teams at the school level and to expand responsibility for the development of the BSP from only specific SBBH staff to a TEAM that includes these professionals. Several complexes expressed interest in this training. Currently, SBBH State Office is in the process of selecting a pilot complex, which will be provided extra training and support during the next quarter in integrating BASC-2 data into the writing of measurable goals for IEPs and BSPs. The use of BASC-2 and other data for monitoring progress toward goal attainment will also be a primary focus.

4) Training on the Vineland Adaptive Behavior Scales

SBBH State Office arranged for Dr. Hankin from American Guidance Services to provide training on March 7-11, 2005 on Oahu, Maui, Hawaii and Kauai. Vineland training is important because these scales which have been widely used throughout the state of Hawaii for decades, were recently revised.

5) Training on use of Family Interventions to Improve Student Performance

A small but significant trend has been identified through review of the types of intervention implemented by counseling providers. Family counseling was an adjunct to individual counseling for 11 percent or an average of 801 students this past quarter. This reflects a slight decrease from the 12 percent or an average of 824 student/families per month in the previous quarter and a trend when compared to the 16% of students who received family counseling a year ago. Overall, ratios for types of services provided were similar for the past year, with the most change noted in the five percent decrease in students who received family counseling as a service. Although a number of factors may be leading to this trend, a decision was made last quarter to increase training focused on the empirically based efficacy of family-based interventions. This plan is now being further expanded.

Many DOE staff attended a workshop provided by the Department of Health on December 15, 2004 titled "Family Interventions". This workshop, which included nationally renowned speakers, provided information about family interventions that have been studied and found to be effective. It also identified some problem areas that cannot be effectively resolved without involving the family system.

The State SBBH Educational Specialist emphasized the purpose and use of parent counseling/education/training in the *Standards of Practice* training that she conducted throughout the state. The use of the Parent Rating Scales to identify needs and goals for family intervention has been emphasized throughout the BASC-2 trainings this past quarter. Family interventions will also be integrated into other DOE trainings.

The value of parent counseling/education/training will also be integrated into a training that will be provided by Dr. Bruce Chorpita, Director of the Anxiety Clinic and professor from the clinical psychology program at the University of Hawaii. He will be presenting on the use of empirically based interventions for children with disruptive behavior disorder. He will be providing practice in the use of family and parent interventions noting that research indicates that parent training/education and other family interventions are the most effective for students with these disorders. Several hundred staff are expected to attend the two workshops in July 2005 and the follow-up conference in October 2005 because the use of empirically based interventions for disruptive behavior was also identified as the first choice for training in a survey of SBBH staff conducted during the last year.

6) Reauthorization of IDEA

DOE will co-sponsor the Hawaii Association of School Psychologists annual conference again this year. The president of the National Association of School Psychologists, Dr. Leland Huff, will be the keynote speaker, and the theme selected is "Integrating IDEA Reauthorization into School Based Behavioral Health: Implications for Collaborative Service Delivery". This training is important due to changes that must be implemented soon.

In summary, SBBH State Office staff provided statewide intensive training to DOE employees during this quarter. Three primary areas were addressed in training: writing measurable service goals, student progress monitoring, and preparation for the use of the BASC-2 for student progress monitoring and SBBH program evaluation monitoring. Family intervention training was addressed through DOH. The presentations on the BASC-2 implementation were important to prepare staff for the use of this tool for program development, progress monitoring and program evaluation. The training on the new revision of the Vineland Adaptive Behavior Scales is critical in assuring that those who use this test are familiar with the aspects of the revision they will need to administer and interpret it. A solid understanding of writing measurable goals has been attained, but the progress monitoring is a more difficult skill to acquire without concrete case experience using these skills. This will continue to be the focus during the next quarter. Additional training sessions have been scheduled for next quarter as efforts continue to target the improvement of system functioning and outcome oriented services for students.

District-Level Training

There were 80 formal training sessions provided to 3,001 staff between January 1, 2005 and March 31, 2005. The total number of district-level training sessions was reduced 35% from last quarter. There are at least two factors that account for this reduction.

1. The previous two quarters reflected a more than usual increase in trainings, while the number of trainings this past quarter is within the range of normal fluctuation.
2. A large number of trainings was provided from the SBBH State Office which absorbed much of the total training time available for this quarter. These trainings are not included in this report of district training.

In every district, multiple role groups attended trainings and completed standardized evaluations of the presentation, content, process and applicability of the sessions. Quality measures averaged 4.6 on a 5-point scale which indicated high consumer satisfaction and utility.

Some topics, such as Chapter 56, ISPED, FBA/BSP, Writing Goals and Objectives, Strategies for Children with Autism Spectrum Disorder, BASC-2 SOS Training, Mandated Child Protective Services (CPS) Reporting, CSSS Training, Woodcock-Johnson III, Evidence-Based Practices, Reactive Attachment Disorder and Crisis Prevention and Intervention/Nonviolent Crisis Intervention were repeated this quarter.

However, new presentation topics included 504 Assessment and eligibility, Play Therapy, Working with the Strong Willed Child, Loving Solutions for the Strong Willed Child, Legal Issues, Reauthorization of IDEA, Graphing Data for Progress Monitoring, Suicide/Self-Mutilation, Working with Autism Spectrum Disorder, Using Verbal De-escalation, engagement Skills, Social Maladjustment Versus Emotional Disturbance, Developmental Implications for learning, WISC-IV, Case Management, ICE Epidemic and Supporting the School Counselor, Administering the WAIT, The Teen Brain: Implications for Learning and Behavior, Understanding Grief and Abandonment, Counseling

Strategies, and Adaptive PE for CDTF.

Although there was a reduction in the total staff trained by districts during the past quarter (3,001 last quarter to 1,861 participants this quarter), there are two factors which explain this change. During the October-December quarter, the districts had increased training by 30% over the July-September quarter, and this quarter's numbers appears to be a return to previous training levels. There was also a large increase in the number of trainings provided from the state level including intensive training on the BASC-2. The number of staff who attended trainings provided by the Doctoral Level State School Psychologist, the SBBH State Educational Specialist and American Guidance Services increased from 749 participants last quarter to 1,524 this quarter.

Supervision

In addition to the subject-focused group training sessions, staff continue to receive ongoing professional supervision. This is equally important in order to assure application of concepts learned through formal training sessions and to monitor the use of evidence-based interventions. District level School Psychologists, Clinical Psychologists, Program Managers and some Complex level School Psychologists monitored the application of training into service delivery through supervision, consultation, and one-on-one assistance as needed. Many also provided direct services to students. In the January through March 2005 quarter, 51-58 Psychologists and other Supervisors reported that a total of 1,316 supervision and 252 training sessions were provided to staff. This indicates the average number of supervisory staff reporting this quarter reduced slightly, but when compared to the same quarter last year, there is a 12% reduction in supervisory staff. Although the number of supervisory sessions has increased by 1 when compared with last quarter, there is a 30% reduction in supervisory sessions when compared with the same quarter last year. There is a 9% decrease in training sessions this quarter when compared to last quarter.

Please refer to the psychologists' and SBBH supervisors' activity data below.

Professional Activities	January Total	February Total	March Total	Quarterly Total
Consultations	1,381	1,654	1,550	4,585
FBA/BSPs	84	102	88	274
Counseling/Parent Training	180	233	272	685
Assessments	138	144	134	416
Observations	167	205	188	560
Student Meetings	557	614	525	1,696
Non-student Meetings	302	380	324	1,006
Court Involvements	46	52	53	151
Data input (ISPED) sessions	113	173	181	467
Supervision	370	457	489	1,316
Provide Training	71	93	88	252
Receive Training/Research	91	109	108	308
Number of Professionals	51	56	58	

Summary of Department of Education System Infrastructure and Performance

The Department of Education has set and maintains high expectations regarding infrastructure and performance goals. Ongoing measurement of performance related to the goals indicate that over the past 27 months the Department has not only maintained infrastructure and performance, but strengthened existing infrastructure and improved performance.

The Department meets or exceeds infrastructure expectations in the following areas:

- Qualified personnel: Special Education Teachers and SBBH professionals,
- Capacity to contract for necessary services not provided through employees,
- Adequate funding to provide a comprehensive system of care for students requiring such services to benefit from educational opportunities, and
- Integrated data management information to adequately inform administrative decisions necessary to provide timely and appropriate services.

The Department of Education continues to be challenged to meet Department established targets for the distribution of qualified special education teachers and paraprofessionals in classrooms.

Performance Measures reveal either improvement or stability in all areas.

The following Performance Measures were met or exceeded:

- Timely evaluation and program plan development
- Service delivery gaps
- ISPED reports for management
- Availability of contracts to provide services
- Administrative action to assure adequate funding
- Use of Home/Hospital Instruction
- Training in reading strategies
- Quality of services to students with ASD
- Quality and availability of SBBH services
- Reading Strategies in IEPs

While performance is high and improving in these areas, the Department's performance goal in the area of Reading Assessments prior to IEP development and current IEPs in ISPED were not met. Similarly, while progress in reducing the ratio of suspensions for regular education and special education students and the overall number of requests for impartial hearings has been made, the net results are still less than desired.

Overall, in this reporting period the Department has continued to sustain a level of infrastructure and system performance consistent with or better than a year ago and even last quarter. Corrective actions directed at state,

complex, and school level, based on data and analysis are leading to improvements, not just at the complex level but within specifically identified schools. The data in this section provides further evidence of the commitment within the Department at all levels to maintain and improve the delivery of educational and behavioral/mental health services to students in need of those services beyond that required by federal statute and court orders.

The Department expects that ongoing system performance assessments, subsequent training, and the posting of school by school performance indicators will not only maintain this level of performance but will improve system performance to high levels in all schools

This quarter the Department has initiated planning and implementation of the System Accountability Office. The creation of an office within the Office of the Superintendent tasked with compliance and performance monitoring at the system level is a testament to the success demonstrated over the past several years in meeting high system performance expectations in providing services to students in need of educational and mental health supports and services. The new office will include compliance and performance of federal and state programs, including special education.

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